HEALING FROM HURT: GOD'S GUIDE FOR GOING FORWARD FROM PAIN TO PROMISE

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ABSTRACT

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"Healing from Hurt: God's Guide for Going Forward from Pain to Promise" examines trauma-informed leadership at the Progressive Baptist Church in Indianapolis, Indiana. The research hypothesized that if the leaders of the Progressive Baptist Church participate in a series on understanding trauma, they would be better equipped to assess how trauma has impacted their leadership. Research methods included presentations, journaling, group discussions, entrance assessments, and exit interviews. Research results indicated that 100% of participants reported a clearer understanding of trauma, particularly the loss of the former pastor, as a negative influence on leadership and the overall culture of the church.

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Senior Pastor. Each of these spiritual leaders and communities has played a vital role in my development, nurturing my faith and calling.

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DEDICATION

This work is lovingly dedicated to my Nana, whose wisdom still guides me, and my grandfather, Sy Baker, my greatest supporter. To my wife, Tyfany, my rock—I am forever grateful for you. To our children, Parker, Savannah, and the son we eagerly await—this journey is for you. You are deeply loved, always.

INTRODUCTION

God has a sense of humor. When He called me to leave Washington, D.C., and move to Indianapolis, Indiana, it was far from what I had anticipated—but in hindsight, my expectations could not have been more misguided. For the past six years, I have had the distinct privilege of serving as the Senior Pastor of Progressive Baptist Church. Stepping into senior leadership has been the greatest challenge of my ministerial career; yet it has also served as the most transformative force in my personal and professional development.

Ironically, the early childhood traumas that once drove me away from the church became the very experiences God used to anchor me to it—Progressive Baptist Church in particular. My predecessor, Michael K. Jones, was a formidable leader, a gifted musician, a compelling preacher, and a deeply beloved pastor. During his twenty-two years of dedicated service, he guided the church through seasons of extraordinary growth, extensive community engagement, a significant relocation, and a major building project. Sadly, we never had the chance to meet. After more than two decades of devoted leadership, he folded his tent and went on to glory, leaving behind a heartbroken congregation.

On the surface, the church appeared healthy when I arrived. However, as I delved deeper, it became clear that the trauma of his passing had left a far more profound impact than many had initially recognized. This was especially evident in the nearly three-year

gap between his departure and my arrival. While the church remained financially stable, it was emotionally fractured. The unprocessed grief and unresolved pain had gone undiagnosed, exacerbating an already fragile state. The deacons had scattered, lay leaders had become disheartened, attendance had dwindled, and the church was in dire need of healing.

It took me years to understand that I was not the true object of the congregation's frustration, but rather the recipient of their unresolved grief. I wish I had possessed the insights I now have. Initially, my project sought to explore transitional leadership with the goal of mitigating the detrimental effects of pastoral vacancies. However, through the wisdom and guidance of Dr. Al Kennon (to whom I owe deep gratitude), I was encouraged to focus not merely on the symptoms but on the root cause of the issue. Our conversations led me to examine how unrecognized and suppressed trauma influences leadership, and how equipping leaders to identify and address their own trauma can ultimately transform both their ministry and the congregations they serve.

Chapter One explores the intricacies of my life, which ultimately leads to my calling story and the assignment where I currently serve. This chapter highlights the connections between my ministerial journey, ministry experiences, and those of Progressive Baptist Church. The demographics of the state, the city where the church is located, and their fascinating histories are considered throughout the chapter. Research data was obtained from archives, census materials, and contextual assessments.

Chapter Two centers on the Old Testament books of Deuteronomy and Joshua, which I believe express God's intention for progression following the loss of leadership. The mandate given by God after the "untimely" loss of their long-standing leader, Moses,

was to mourn for a period, then it was time to move forward. Additionally, I consulted Acts 1:6-11. In the aftermath of the crucifixion, Jesus returns and converses with the disciples. They have questions, but the answers are not exactly what I would imagine they want. His encouragement to those remaining is that ministry must move forward; the intention is not for the work to cease. The promise given in both instances is supernatural empowerment. In Joshua, it is a subtle nudge to go forward; in Acts, it is a command to be still temporarily until power is received.

Chapter Three lays the historical foundation for this project. This research will explore how Sigmund Freud developed his theories on psychoanalysis and psychodynamic therapy, as well as how his ideas influenced both his contemporaries and subsequent generations of psychologists. Freud's work continues to shape our understanding of human behavior, unconscious processes, and therapeutic practices. Scholars, clinicians, and researchers often analyze Freud's contributions in light of modern psychological theories. His writings and the foundational principles of psychoanalysis can be appreciated from a more nuanced perspective, recognizing both their groundbreaking insights and their lasting impact on contemporary psychotherapy.

Chapter Four presents the theological foundation of this project. As we explore the theology of trauma, I will examine its connection to biblical narratives and theological frameworks that address suffering, healing, and redemption. This study will draw from theodicy, pastoral theology, and liberation theology to understand how faith communities respond to trauma and how theological reflection can foster resilience and restoration. I will investigate the origins, core principles, and implications of these theological perspectives, demonstrating how they offer a meaningful framework for

addressing trauma in both individual and communal contexts. It is my hope that this theological exploration will contribute to a deeper understanding of trauma-informed ministry within local congregations.

Chapter Five, the interdisciplinary foundation chapter, explores the integration of psychoanalytic and psychodynamic therapy within the church. This chapter examines the core principles of these therapeutic approaches and how they align with theological and pastoral care practices. As mental health awareness grows, there is a pressing need for faith communities to move beyond traditional pastoral counseling and embrace psychologically informed methods that address trauma, emotional wounds, and unconscious conflicts. Just as leaders in various industries adapt psychological insights to improve organizational effectiveness, church leaders must integrate psychoanalytic and psychodynamic perspectives to foster emotional and spiritual healing.

Chapter Six analyzes the development, implementation, and discoveries of this research project, which aimed to develop leaders by training them to understand personal trauma and its impact on their current leadership. The focus of this project was to evaluate participants' understanding of trauma and their readiness to engage in ministry following a six-week Bible study series that explored the theology of trauma and the integration of psychoanalytic and psychodynamic therapy in leadership. This chapter presents the qualitative research methods and strategies employed to assess participants' experiences throughout the study. The results are analyzed through the lens of trauma-informed leadership, emphasizing how awareness of one's own psychological and emotional wounds can improve ministerial effectiveness. The findings identify critical areas for enhancement and provide recommendations for future implementation, ensuring

that church leaders are better prepared to support both themselves and those they serve in healing and transformation.

CHAPTER ONE

MINISTRY FOCUS

Introduction

Ministry is certainly a calling. Our journey to the places God intends for each of us is different and once we comprehend the seemingly irrelevant pitstops along the way are invaluable, we can identify the linkages from yesterday to today. Much of my complaining about the journey can be tied to a genuine feeling of wasted time and effort. For years, I questioned God's reasoning. Why would you allow me to have all these experiences if you were going to send me into a ministry where all of it is useless? What was the point? I recently applied for a position to generate extra resources for our household and glanced at my full résumé, it was several pages long.

The Athletes Foot was my introduction to retail, Marriot Hotels developed my customer service skills, D3 allowed me to explore the importance of marketing, Knowledge Is Power Preparatory permitted me an in-depth look at the inner workings of education, Brownstone Realty Partners specialized in commercial real estate development in New York, where I was the youngest intern and The First Tee of Greater Washington brought me back to the game I loved since childhood. However, there seemed to be no room for golf at the church, no enthusiasm around marketing, no real estate expansion projects, no retail shops, no customer service initiatives, or anything remotely related to education. While glancing at my once celebrated résumé, all I could see was wasted time.

This chapter chronicles my spiritual journey, marked by the uncomfortable yet liberating process of addressing buried trauma, pursuing mental wellness, and navigating grief within the context of personal experiences and the church. It explores the intersections of faith, personal growth, and community engagement through candid reflections and real-life anecdotes. It underscores the importance of acknowledging and addressing trauma, fostering mental wellness, and supporting individuals through grief, highlighting the pivotal role of the church in facilitating healing and restoration.

The intersectionality of interests is such an odd thing for me to consider. Especially since so many of my younger years were spent upset with the Lord for taking my father prematurely and ruining our family. I divorced the church and plunged myself into “distractions,” never really stopping to consider whether the things I was doing outside of church had any relevance to the church. As I grew older, the church was church, and everything else existed in the secular world; never the two should meet. Being interested in sports, community development, educational programming, and traveling were personal endeavors that offered no value elsewhere. The skills I developed in the World stayed at the door in the rare occurrences of occupying a seat in a sacred space. Over the last several years as a pastor my errant thinking has been exposed to me. Ministry can include personal interests, how we pursue changes, our reasoning for their pursuit of changes, and God can bring things together.

The things that interest me most are travel, community development, and my love of sports. Travel in ministry is missional work, evangelism, and outreach. Community development is visible in activism, social justice reformation, and leadership training. Sports were more difficult to engage in until we created a golf tournament that generated

scholarships for first-generation college students. Rather than approaching this selfishly by imposing all my pre-calling ambitions on the people I pastor, what God wanted us to do collaboratively needed to be considered. Before ministry began, my love for people existed. Seeing people win, experiencing accomplishments, and overcoming hardship stirs excitement within me. My love for people is the cornerstone of all everything important and the common thread uniting these was harder to identify. After service one Sunday, I was asked a question regarding a statement in my sermon; the statement was, "I never wanted to be a Pastor or preacher; God called me. Had I been allowed to do anything else… I would." Curious about my rationale, a member asked, "What would you be doing if God permitted?" Quickly, I jokingly rattled off a list of better options. Her response was, "I'm certainly glad God called you because none of those things make people better, they just trick us into believing we can forget."

The Lord knew I belonged at Progressive Baptist Church. My traumatic childhood experiences of loss developed like their recent pastoral loss. This inward tendency to retreat, escape, ignore, and avoid reflecting on and processing painful memories was a shared condition. God united us to assist one another on our journey toward improvement and wellness.

My passion lies in creating a doctoral project that delves into the intricate relationship between traumatic experiences and leadership efficacy. I aim to explore how unresolved grief, and other traumatic events can manifest in frictional occurrences that impede an individual's ability to lead effectively. By examining the impact of trauma on leadership dynamics, I hope to uncover insights that can inform strategies for promoting resilience and fostering healthier leadership practices. My vision is to implement a series

of leadership training modules within the congregation tailored to address the specific challenges and needs arising from traumatic experiences. Through these initiatives, I aspire to cultivate a culture of support, growth, and empowerment, enabling leaders to navigate adversity with grace and efficacy, ultimately fostering positive change within the congregation and beyond. My problem statement is, poor succession planning and unresolved hurt after Progressive Baptist Church's loss of previous pastoral leadership resulted in administrative decline, leadership vacancy, an exodus of membership, and a traumatized congregation. I hypothesize that if Progressive Baptist Church leaders participate in a series on understanding trauma, they will be equipped to assess how such trauma has impacted their demonstrated leadership.

The passing of Pastor Michael K. Jones left an indelible mark on the Progressive Missionary Baptist Church and the city of Indianapolis as a whole. His sudden death from a heart attack at the age of fifty-two sent shockwaves through the community, leaving both his congregation and the broader community traumatized by the loss of such a beloved and influential figure. As the senior pastor of Progressive Missionary Baptist Church, Pastor Jones was not only a spiritual leader but also a champion for civil rights and social justice. His tireless efforts in these areas earned him numerous accolades and positions on various boards, reflecting his deep commitment to enhancing both his community and the Church universal. His contributions were vast and multifaceted, ranging from hosting community conversations on local radio to leading race relations leadership training and teaching Christian education.

Context

The impact of Pastor Jones's death reverberated far beyond the walls of his church. His passing created a leadership gap that rippled throughout the city of Indianapolis, leaving many to feel adrift and uncertain about the future. Pastor Jones was not only a spiritual guide but also a community leader and advocate, and his absence was keenly felt by all who knew him.

Loss, particularly the loss of an influential figure like Pastor Jones, has long-term effects on individuals and communities. The grief and trauma experienced by his congregation and the city at large can manifest in various ways, including emotional distress, feelings of disorientation, and a sense of collective mourning. Moreover, the void left by Pastor Jones's absence may lead to a crisis of identity and purpose within the church and broader community.

Addressing this trauma requires a multifaceted approach that acknowledges the depth of the loss while also providing space for healing and renewal. First and foremost, it is essential to create opportunities for individuals to express their grief openly and honestly, whether through counseling, support groups, or communal rituals of remembrance. Providing avenues for collective mourning and reflection can help foster a sense of solidarity and connection among those affected by Pastor Jones's passing.

Additionally, it is crucial to honor Pastor Jones's legacy by continuing his work and advocacy for social justice and community empowerment. This may involve mobilizing resources to support initiatives and organizations that align with Pastor Jones's values and priorities, as well as nurturing emerging leaders within the church and community who can carry forward his vision for a more just and equitable society. The

passing of Pastor Michael K. Jones has had a profound and lasting impact on the Progressive Missionary Baptist Church and the city of Indianapolis. His legacy as a spiritual leader, advocate, and community builder will endure, but the void left by his absence underscores the need for intentional efforts to address the grief and trauma experienced by those who knew and loved him. By coming together in solidarity and continuing his work, we can honor Pastor Jones's memory and ensure that his legacy lives on in the hearts and minds of all who were touched by his life.

Our immediate Church context is informed by the passing of my predecessor and the leadership gap that resulted surely indicates the severity of the trauma. Additionally, the citywide traumatic events are of considerable impact. Indianapolis, Indiana, like many urban centers in the United States, grapples with complex socio-economic dynamics that significantly impact its communities. These dynamics include issues such as the murder rate, crime rate, juvenile incarceration, poor literacy rates, and the historical legacy of racial violence perpetuated by organizations like the Ku Klux Klan (KKK). Understanding these dynamics is crucial for comprehending the challenges faced by residents, particularly African Americans, and identifying strategies for addressing systemic inequalities and fostering community development.

Indianapolis has experienced a persistent struggle with violent crime, including homicides. The city's murder rate has fluctuated over the years, but it has consistently remained above the national average. Factors contributing to this include socio-economic disparities, drug trafficking, gang activity, and the easy availability of firearms. The prevalence of violent crime creates a climate of fear and insecurity within communities, impacting residents' quality of life and exacerbating social tensions. The juvenile justice

system in Indianapolis, as in many other cities, disproportionately affects marginalized communities, including African American youth. Factors such as poverty, lack of access to quality education and healthcare, and systemic racism contribute to the overrepresentation of African American youth in the juvenile justice system. Juvenile incarceration not only disrupts the lives of young individuals but also perpetuates cycles of poverty and crime, further marginalizing already vulnerable communities.

Education is a key determinant of socio-economic outcomes, yet Indianapolis struggles with poor literacy rates, particularly in underserved neighborhoods. Limited access to quality educational resources, underfunded schools, and inadequate support systems contribute to disparities in literacy levels. Poor literacy rates hinder individuals' ability to access employment opportunities, perpetuating cycles of poverty and limiting social mobility. The battle with literacy and economic disparities in Indianapolis is multifaceted, as evidenced by recent data indicating stagnation in reading competency among third graders. Nearly one in five students failed the literacy assessment, reflecting a persistent decline in reading proficiency over the past decade. Despite efforts to address this issue, such as setting ambitious goals for reading proficiency and implementing new laws mandating evidence-based reading curricula, the results remain disheartening.

The impact of this literacy crisis is far-reaching, with implications for academic achievement and future economic opportunities. Research has shown a clear correlation between reading proficiency by the end of third grade and students' ability to absorb and retain knowledge effectively. However, disparities persist among student subgroups, with English language learners, Hispanic, and Black students lagging significantly behind their

White counterparts. This achievement gap reflects broader systemic inequalities, including income disparities and racial segregation in educational settings.

Family income also emerges as a significant factor in determining reading fluency and vocabulary development skills. Students from lower-income backgrounds consistently score lower on literacy assessments than their more affluent peers. This socioeconomic divide underscores the entrenched nature of economic disparities within the education system.

Moreover, pass rates vary widely among different school districts, highlighting disparities in educational resources and opportunities. Traditional public-school districts serving large populations of low-income and minority students, such as Indianapolis Public Schools, report lower pass rates than more affluent districts like Hamilton Southeastern Schools. Non-public schools, particularly those affiliated with religious organizations, often report higher pass rates, further exacerbating inequities in access to quality education.

The implications of Indianapolis's literacy crisis extend beyond the classroom, affecting the city's economic viability and workforce readiness. As Scott Bess, a member of the State Board of Education, emphasizes, addressing literacy disparities is essential for ensuring the future prosperity of Indiana's economy. Failure to close the achievement gap among diverse student populations jeopardizes the city's ability to attract businesses and compete in a globalized economy. Indianapolis faces significant challenges in addressing literacy and economic disparities. Deep-rooted systemic issues contribute to persistent inequalities in educational outcomes. Efforts to improve literacy rates must be accompanied by broader initiatives to address socioeconomic barriers and promote equity

in education. Only through concerted and collaborative efforts can Indianapolis hope to create a more inclusive and prosperous future for all its residents.

As a church, there has been trauma; locally, there is present tension, and historically, there are statewide factors that negatively impact Progressive Baptist Church. The Ku Klux Klan's presence and influence in Indiana, particularly in Indianapolis, have had lasting repercussions for African American communities. Founded on principles of white supremacy and racial hatred, the KKK perpetrated acts of violence, intimidation, and discrimination against African Americans and other minority groups. Although the Klan's prominence has diminished over time, its legacy persists in the form of systemic racism, socio-economic disparities, and intergenerational trauma experienced by African American residents.

The impact of these socio-economic dynamics is profound, contributing to cycles of poverty, crime, and social unrest within Indianapolis communities, particularly those inhabited by African Americans. Addressing these challenges requires a comprehensive approach that addresses root causes, including systemic racism, economic inequality, and disparities in education and opportunity. Initiatives focused on community empowerment, education reform, access to mental health services, and criminal justice reform are essential for fostering positive change and building a more equitable and inclusive city for all residents.

The impact of the Ku Klux Klan's influence in Indiana, particularly in Indianapolis, has left a legacy of racial tension and systemic racism that continues to affect African Americans and the socio-economic climate of the state. During the 1920s, the Klan gained significant traction in Indiana, with membership reaching astonishing

levels and penetrating various spheres of society, including politics, business, and religion. The Klan's anti-immigrant, anti-Semitic, and anti-Catholic rhetoric resonated with many Hoosiers, particularly those of the Protestant faith, leading to widespread support for the organization.

The Klan's ideology of white supremacy and nativism fostered an environment of segregation and discrimination, targeting minority communities and perpetuating racial divisions. African Americans in Indianapolis, already marginalized by systemic racism, faced heightened hostility and violence fueled by Klan propaganda. The Klan's message of "us vs. them" exacerbated racial tensions and reinforced notions of racial superiority among white Hoosiers. Furthermore, the Klan's influence extended beyond racial animosity to encompass broader socio-economic disparities. By promoting an exclusionary definition of American identity based on ethnicity, religion, and race, the Klan contributed to the marginalization and economic disenfranchisement of minority groups, including African Americans. Black unemployment rates soared as discriminatory hiring practices and systemic racism limited job opportunities and economic mobility for African Americans in Indianapolis.

Despite the decline of the Klan as an organized entity, its legacy continues to shape perceptions and attitudes in Indiana. Modern-day manifestations of white nationalism and supremacist ideologies echo the Klan's rhetoric of racial division and exclusion. The rise of the "alt-right" and similar movements underscores persistent challenges related to racial intolerance and bigotry in the state.

However, the Klan's history also serves as a cautionary tale and a reminder of the dangers of extremism and hatred. Indiana's experience with the Klan has prompted

reflection and soul-searching, leading to efforts to combat racism and promote inclusivity. By acknowledging and confronting the state's dark past, Hoosiers strive to build a more equitable and tolerant society that rejects the divisive ideologies espoused by groups like the Klan. The Ku Klux Klan's legacy in Indiana, including Indianapolis, is characterized by its profound impact on race relations, systemic racism, and socio-economic disparities. While the Klan's influence has waned over time, its lingering effects continue to shape the socio-political landscape of the state, underscoring the ongoing struggle for racial justice and equality. Additionally, acknowledging and confronting the historical legacy of racism and white supremacy, including the impact of organizations like the Ku Klux Klan, is crucial for promoting healing and reconciliation within Indianapolis and beyond.

Ministry Journey

My extensive experience in ministry, coupled with my academic background, equips me with a unique set of skills and interests that can significantly inform my Doctor of Ministry project. My current position as Senior Pastor and previous positions as Assistant Pastor and Youth Pastor have provided me with invaluable leadership experience and a deep understanding of pastoral care, spiritual counseling, and community engagement.

My ability to shepherd individuals to Christ and engage the community through outreach reflects a commitment to fostering spiritual growth and social impact. Participating in ministry successes by increasing church membership, restoring church budgets, and implementing educational programs demonstrates proficiency in strategic planning, organizational management, and program development.

Additionally, my experience as an Adjunct Professor and Youth Pastor highlights my passion for education and mentoring. I can facilitate personalized learning experiences and cultivate meaningful relationships with students and congregants alike. This expertise in education and mentorship can be instrumental in designing and implementing leadership training modules as part of my Doctor of Ministry project.

Furthermore, all the time spent serving in community outreach, event planning, and partnership development underscores a consistent dedication to addressing social issues and fostering collaboration between churches, community organizations, and local agencies. This experience will inform my project by providing insights into effective community engagement strategies and the importance of holistic ministry approaches that are influenced by the pursuit of communal mental health.

Finally, drawing on my skills in public speaking, counseling, educating, and mentoring, as well as my passion for community engagement and social justice, are foundational in exploring topics related to pastoral leadership, church growth, and community development in the Doctor of Ministry project. By leveraging these varied areas of expertise and interests, I have developed a hypothesis that addresses the long-term impact of traumatic experiences on leadership within the context of Progressive Baptist Church, with a focus on implementing transformative leadership training modules to address unresolved grief and promote healing within congregations.

My journey as pastor of Progressive also includes my wife Tyfany. Although my wife and I are preparing to celebrate six years as Pastor and First Lady of Progressive Baptist Church, we still have much to learn. The diversity she brings as an Afro-Latina woman widens our reach, as does her years of service at the Knowledge Is Power

Preparatory. Her academic background allows her to observe subtleties that I often overlook and provide leadership to wounded families in her context and our congregation. The loss of my predecessor had a lasting impact on our church and other people that I have not met. Progressive is part of the city, and our hurt is shared. Combined with the hurt of frequent shootings, many of which have been done by teenagers, continues affecting people across the city.

As I consider trauma, particularly the lasting effects, I think of members like Glenda that I have never met. I have been pastoring for years, and though she will call me pastor, she has not returned to fellowship since Pastor Jones died. We have spoken on the phone throughout the years, and we text daily. She and Pastor Jones were close friends. She has candidly shared that she has not recovered since his passing. At one point, she sang in the choir weekly. However, she has not since he died. She has become a recluse. Her mother passed away recently, and I preached the funeral. I thought I would meet her then, but she refused to leave her home.

Years ago, T.D. Jakes preached a series entitled “Seven Steps to a Turnaround,” and in it, he argues that the first step to turning your life around is exposure. Simply knowing that something exists increases something within you to want better and push toward it. Exposure is not limited to travel. It has roots in education, workforce opportunities, and treatment options that are readily available. Covid has done a great deal for pushing mental health awareness to the forefront and lessening the stigma of seeking help. Although the murmurs are fewer, it sometimes feels Progressive has not received the memo. The lack of mental health education in our area might have started

because of systematic racism, but it can be mitigated by our church's intentional participation in bridging the gap.

The experience of medical mistrust among African Americans, particularly African American men, is deeply rooted in historical and contemporary contexts, influencing our interactions with healthcare organizations and professionals. This mistrust has significant implications for healthcare disparities and the utilization of healthcare services. The legacy of medical malice, dating back to incidents such as the Tuskegee Study of Untreated Syphilis in the Negro Male, has contributed to African Americans' mistrust of healthcare organizations. The Tuskegee Study of Untreated Syphilis, conducted between 1932 and 1972, involved withholding treatment from African American men with syphilis without their informed consent, leading to enduring suspicions about the motives of healthcare providers. This mistrust is intertwined with notions of masculinity, as traditional masculine beliefs may discourage men from seeking help or expressing vulnerability, including in healthcare settings.[1]

African American men's constructions of masculinity are shaped by sociohistorical challenges and desires for power and autonomy. These constructions influence their perceptions of healthcare interactions, with a desire to maintain control over their bodies in the face of historical and contemporary experiences of discrimination and mistreatment. These interactions shape individuals' outcome expectations, leading them to anticipate mistreatment or neglect in future healthcare encounters.

Understanding these factors is crucial for addressing healthcare disparities and improving healthcare access and utilization among African American communities. By

[1] Center for Disease Control and Prevention, "The Tuskegee Study of Untreated Syphilis," Centers for Disease Control and Prevention, https://www.cdc.gov/tuskegee/about/index.html.

acknowledging the historical and socio-cultural contexts of medical mistrust and developing interventions that address these underlying issues, healthcare organizations and professionals can work towards building trust and promoting equitable healthcare delivery for all individuals.

My home church heavily influenced my perspective of how the church should function. At New Jerusalem Primitive Baptist Church, the men lead. I assumed corralling men to push forward was a simple endeavor; their distrust of leadership, medical mistrust, and unspoken hurt was never a matter I considered until recently. Over the last three months or so, I have had more conversations about therapy, meditation, and cultivating communication spaces than ever before. Surely, these things have always been prevalent, but my awareness because of this project has made me more participatory in them. This program and these assignments have placed an exclamation point on what is happening around me, making it impossible to ignore.

Above all else, there is a noticeable bridge between my mishandling of my father's passing and now having to deal with it in a congregational setting. For many, we retreat. We run from what we identify as uncomfortable, and it becomes undesirable. Recently, one of my best friends lost his father unexpectedly, and I was called upon to deliver the message. I had known his father for sixteen years. We played golf together. I visited the house, and he would randomly check on me as if I were his own. I was sitting in the hospital room for nearly six hours as life slowly became death. I was reminded of my eight-year-old self, sitting on my father's deathbed, pleading with him to get up.

I still remember skipping my father's funeral and going to Chuck E. Cheese because I refused to accept the verdict I had not chosen, and somehow, God has

comically selected me to journey with families and strangers as they wrestle with suffering that does not appear to have redemptive qualities. The need for community is important now more than ever, and there is something beautiful about death that brings people together who otherwise would never have connected. I thank God for this and other recent revelatory moments that accentuate where I am supposed to serve.

This chapter is a testament to my journey of self-discovery, healing, and transformation within the context of personal experiences and the church. It underscores the importance of acknowledging and addressing trauma, pursuing mental wellness, and navigating grief while highlighting the pivotal role of community support and spiritual guidance. Through candid reflections and practical insights, it aims to inspire others to embark on their own journeys of healing and growth, recognizing the transformative synergy between personal experiences and faith communities.

In my formative years, I had the privilege of witnessing African American professionals navigate various fields, a sight once rare but now increasingly common as opportunities expand. However, irrespective of race or background, the pervasive impact of mental health challenges remains indifferent to socioeconomic status or academic achievements. Trauma, anxiety, depression, and personality disorders transcend societal divides, affecting individuals across diverse demographics. Moreover, the rapid advancement of technology has revolutionized mental health support, with virtual counseling and social media platforms offering discreet avenues for seeking assistance, particularly appealing to younger generations, so the excuses are less believable. This evolution in accessibility underscores the importance of staying abreast of

emerging resources and information to offer inclusive and comprehensive support to those in need.

In our community, we are proactively engaging in outreach efforts, forging partnerships with neighboring schools to provide mentorship and guidance to promising students. One notable success story involves a young member of our congregation who secured an internship at Roche, a global leader in biotechnology. This opportunity, facilitated by a recommendation from within our community, ultimately propelled the student to academic success, including acceptance to Princeton, despite facing personal challenges.

These initiatives reflect a departure from outdated notions of silent suffering, a shift catalyzed in part by the COVID-19 pandemic. As I continue to grow in my ministry leadership role, I have come to appreciate the complexity and evolving nature of our congregation's challenges. Rather than attempting to address every need alone, I embraced a collaborative approach, leveraging partnerships with individuals whom I believe God is using to positively impact our community. In essence, my journey in ministry has underscored the importance of holistic support, recognizing the interconnectedness of spiritual, emotional, and practical needs. By fostering inclusive environments and cultivating strategic alliances, we can better serve those grappling with mental health challenges, affirming their dignity and worth as valued members of our community.

The journey through this research and ministry reflection has been both a mirror and a map—reflecting deep-seated traumas and generational wounds, while also charting a path toward healing, equity, and transformational leadership. Through the lens of

Progressive Baptist Church's current reality, situated within the larger context of Indianapolis and the historical legacy of racial injustice in Indiana, I have come to see more clearly the theological, psychological, and social intersections that must be addressed if we are to faithfully shepherd our communities forward.

At the core of this exploration is the recognition that trauma—both individual and communal—is not just a matter of psychology but of theology, leadership, and discipleship. The unresolved grief that lingers in the lives of congregants like Glenda is not merely a personal burden; it represents a pastoral call. Her story is not isolated. It echoes the unspoken anguish of many in our pews, a grief compounded by historical racial violence, the loss of trusted leaders, and the absence of consistent mental health support. For Progressive, as for many historically Black churches, leadership cannot be separated from healing. The Church must reclaim its role as both sanctuary and site of transformation.

Systemic injustices in Indianapolis—disproportionate juvenile incarceration, underperforming schools, economic disparity, and persistent racialized trauma—function as modern-day Jericho's, walls that seem immovable but must be confronted. These challenges are not abstract. They shape the lived experiences of our members, especially our youth, who carry the weight of societal neglect and spiritual disorientation. The city's literacy crisis, with its disproportionate impact on black and brown children, is not just an educational issue; it is a justice issue. The inability to read proficiently by third grade becomes a pipeline to marginalization, and the Church cannot afford to be silent or slow in its response.

The historical shadow of the Ku Klux Klan's influence in Indiana casts a long and sobering light on today's disparities. While the Klan may no longer march down the streets of Indianapolis in broad daylight, the systems it supported—those rooted in exclusion, racial hierarchy, and the silencing of Black excellence—still inform much of the inequity we witness. As pastor, I am aware that the trauma held within our walls is not only personal but historical. To preach good news in this context requires more than biblical exposition; it requires courageous confrontation of the past and strategic investment in the present.

Yet, this project is not merely about naming what is broken. It is about discerning what is possible. Healing is not just a ministry aim; it is a leadership imperative. We must move beyond reacting to trauma and begin cultivating trauma-informed leadership models that help congregations metabolize grief, cultivate resilience, and rediscover hope. This includes implementing leadership training modules that directly address unresolved grief, intergenerational trauma, and the spiritual implications of loss. If we do not equip leaders to heal, we risk perpetuating cycles of dysfunction, silence, and shame.

My pastoral journey has intersected with this project in transformative ways. The unresolved grief of my father's death, the unexpected call to minister to others in similar pain, and the deepening awareness of my community's needs have brought clarity to my vocation. The pastoral task, I now see more fully, is not just to teach or preach but to midwife healing. It is to hold sacred space for suffering while pointing toward the promise of resurrection. Exposure—whether to new educational opportunities, mental health resources, or models of transformative leadership—is the first step toward collective healing. One of the most significant insights from this project has been the role

of collaboration. Healing cannot be the responsibility of the pastor alone. It must be communal. As I reflect on our partnerships with schools, community organizations, and mental health professionals, I am reminded of the African proverb: “If you want to go fast, go alone. If you want to go far, go together.” The Church, if it is to thrive in the face of trauma and historical harm, must walk together—with therapists and teachers, civic leaders and lay members, skeptics and saints alike.

As Progressive Baptist Church continues to grieve its past and hope for its future, we are not without resources. Our theology affirms that suffering is not the end of the story. The resurrection reminds us that from death can come new life, and from ruins, a rebuilding. My hope is that this project not only contributes to academic discourse but serves as a practical guide for congregational renewal. The aim is not simply recovery but transformation—of individuals, of institutions, and of the systems that have long denied our full humanity.

To that end, I move forward with greater resolve. This Doctor of Ministry journey has sharpened my awareness, deepened my empathy, and expanded my understanding of what it means to lead in a traumatized world. I remain committed to the hard but holy work of guiding Progressive through grief toward healing, from silence toward voice, from fragmentation to flourishing. The work is far from finished, but we now know the direction. And by God’s grace, we are not walking alone.

CHAPTER TWO

BIBLICAL FOUNDATION

For the Church and its leadership to be successful in this next frontier, it is imperative that we embrace the Lord's biblical model for transitional leadership or face the consequences. According to McKinsey and Company in a published article, Scott Keller contends that the necessity for strong leadership is of the utmost importance.[1] Hardly anything that happens at a company is more important than a high-level executive transition. By the nature of the role, a new senior leader's action or inaction will significantly influence the course of the business, for better or for worse. Yet despite these high stakes, leaders are typically underprepared for—and under-supported during—the transition to new roles. The Church is the most important company in the world and the pastor is the most important high-level executive, regardless of Church size. There are some worthwhile considerations that corporate America offers that the Church can model. However, no authority supersedes what the Lord offers us through Holy scripture.

The movement of God is not limited to "after the fact." One lesson that can be gleaned from reading scripture reveals that God is omniscient. Knowing what is upcoming before it arrives uniquely positions God to be perpetually prepared.

[1] Scott Keller, "Successfully Transitioning to New Leadership Roles," McKinsey and Company, https://www.mckinsey.com/capabilities/people-and-organizational-performance/our-insights/successfully-transitioning-to-new-leadership-roles.

Preparedness is a trait that those seeking to be more like the Father and those involved in the Father's endeavors ought to demonstrate. In the spirit of being prepared, we must refrain from waiting extended periods without leadership.[2] From a learning perspective, the weeks and months before a job's official start date are precious. Effective leaders can leverage this time to meet with key people within the company, understand their respective agendas, and learn how they fit together. Every organization has its own culture, which can take on multiple forms, and the goal is to identify the culture and how it flows within the organization. Picking up on this quickly can help new leaders "hit the ground running" in their new assignment. Transitional leadership begins before the vacancy, before the leadership vacuum exists, and before the situation becomes dire.

Progressive Baptist Church was unprepared when my predecessor, Pastor Michael K. Jones, passed away. He was a young man at the time of his passing. After twenty-two years of faithful service, the Lord called him home, and the church struggled tremendously in his absence. From a leadership perspective, most of the lifting was done by Pastor Jones, according to many long-standing members. Upon my arrival, there were two associate ministers who were members, and one had no desire to pastor and had little ambition regarding preaching. On several occasions, it has been shared that Pastor Jones's passing might have been fast-tracked due to a lack of help or an inability to share the weight of leadership responsibility. Considering I never met my predecessor, I am unable to affirm or deny the validity of these statements definitively. However, the frequency of the same hypothesis being shared makes the theoretical appear to be more than probable.

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[2] Deirdre Scully, "Leadership and Teamwork: 10 Ways Leaders Can Help Their Teams," Teamwork, https://www.teamwork.com/blog/10-ways-leaders-teams/.

After the passing of Progressive Baptist Church's former leader, an unshakable period of mourning arrested the membership. I believe many of the challenges we are struggling to hurdle now are anchored in past hurt. I think grief and mourning precede healing, and without them, advancement is stalled. I recall having to submit a second application for the position because the Church insisted on pausing proceeding and recalibrating its requirements. I later found out that much of the halted progression was the byproduct of inward frustration and sadness. From the time of Pastor Jones's passing to my arrival, nearly three years had gone by. The unresolved hurt served as an impediment to healing, therefore prolonging the process of progress. Even now, there are long-standing members who are so sorrowful that the mention of his name evokes tears. I believe the need to address previous hurt is a necessity for healing and the precursor to implementing a transitional plan to avoid such a thing happening again. Death is guaranteed; we are unable to slow or prevent it, but we can prepare what follows it. Granted, transitions are not exclusive to the passing of the leader, as happens to be the case at our church. The usefulness of this document is by no means limited to the passing of a leader but should certainly be especially helpful in such an instance.

I believe Deuteronomy chapter thirty-four and Joshua chapter one present portraits of well-handled leadership transition. Throughout this chapter, my intentions are to explore the grammar and syntax, semantic analysis, socio-historical background, motif-historical background (e.g., Old Testament themes, other influences), literary analysis, and figures of speech used in Deuteronomy chapter thirty-four and Joshua chapter one. In these interconnected passages, Moses, the leader of God's chosen people, reaches the end of his earthly ministry. His exit is triumphant and unlike any before him

or after him. His protegee, Joshua of Nun, assumes the leadership responsibility of the people, and the work continues. The transition from Moses to Joshua is most noticeable in this passage, but the process began well before this moment. I believe their relationship was necessary, and without it, the transitional moment would not have had the same success.

My chapter is categorized into several sections. It begins with an introduction of the topic of healing the hurting before implementing transition, then moving to the need for an intentional mourning period. I intend to address possible leadership needs, the consequences of leadership absenteeism, and God's intention for his people who are still living. The hurt of losing my father comes to mind as I serve the people of Progressive Baptist Church. What assisted me in growing forward was counseling, conversation, and committing to living today and celebrating yesterday.

Objectives of the Chapter

1. To examine the historical and cultural context of the passages and their significance to my problem statement.
2. To evaluate the significance of the passages in relationship to my problem statement and the advancement of my hypothesis.
3. To critically evaluate and interpret a selected passage of scripture in relation to my context.
4. To synthesize key themes and messages and their relevance to my problem statement.

5. To present a comprehensive and well–supported exegetical work of the selected passage that contributes to the development of a more comprehensive understanding of aiding the people I serve.
6. To engage in a theological reflection on the passage and its broader theological context.

The first objective is to determine what the passages are about. No accurate study of scripture is complete unless consideration for the literary context is made. Literary context is background information or circumstances that inform why something takes place; it can also be the backstory of a character, provided to inform their behavior and personality.[3] Establishing context is critical because it makes the literary text sensible.

The second objective is to explore the cultural elements and historical background of these passages.[4] The Bible, like any book, is a product of its time. Knowing the culture and history surrounding a passage is important for understanding it. Commentaries usually acknowledge pertinent cultural-historical context, but you may need to turn to Bible dictionaries and other resources for more information.

The third objective is establishing the genre. Genre is like context in that it creates boundaries for interpreting a text because every genre has its own rules of interpretation. Poetry and apocalyptic literature are heavy with imagery, a component of figurative language. Understanding images embedded within literature is integral to understanding.

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[3] Master Class, "Why Is Context Important in Writing? 4 Types of Context, Explained - 2023," MasterClass, https://www.masterclass.com/articles/why-is-context-important-in-writing.

[4] Master Class, "Why Is Context Important in Writing? 4 Types of Context, Explained - 2023," MasterClass, https://www.masterclass.com/articles/why-is-context-important-in-writing.

Some genres, like epistles and letters, are straightforward. They follow rhetorical constructs that form a logical relationship between clauses.

The fourth objective is to express theological reflections on the passages, specifically their implications for my hypothesis. I will likewise consider the relationship between this passage and other relevant biblical texts. The fifth objective is to determine links between my passages and my problem statement. Hopefully, examining these passages more deeply will provide applicable connections for my current context. The final objective is to clearly present a critical interpretation of my selected biblical passages and clearly identify their intended meaning.

Deuteronomy Overview

The Book of Deuteronomy, the Torah (Genesis through Deuteronomy), and the era of Israel's foundations all come to an end with the death of Moses.[5] He has led them out of Egyptian slavery and has guided them through the wilderness and the various difficulties and vicissitudes of their life together in those difficult circumstances. He has taught them all the instructions and laws that the Lord gives them as the means of life. He interceded for them when they did not keep the commandments; he reprimanded them when they complained to him and to the Lord about their condition. He is truly the servant of the Lord. There is nothing more for him to do except to lead the people into the land. But that is the one thing not given to Moses to do.

[5] Patrick D. Miller, *Deuteronomy, Interpretation, a Bible Commentary for Teaching and Preaching* (Louisville, KY: John Knox Press, 1990), 241–242.

God permitted Moses' success. When the initial call was made, Moses was apprehensive about accepting the charge. God permits the entirety of his ministry because of Moses' reliance on God. He was obedient to God, communicative with God, and compassionate toward the people of God, but a turning point occurred, referenced in Deuteronomy 3:23-29:

> At that time, too, I entreated the Lord, saying: "O Lord God, you have only begun to show your servant your greatness and your might; what god in heaven or on earth can perform deeds and mighty acts like yours! Let me cross over to see the good land beyond the Jordan, that good hill country and the Lebanon." But the Lord was angry with me on your account and would not heed me. The Lord said to me, "Enough from you! Never speak to me of this matter again! Go up to the top of Pisgah and look around you to the west, to the north, to the south, and to the east. Look well, for you shall not cross over this Jordan. But charge Joshua, and encourage and strengthen him, because it is he who shall cross over at the head of this people and who shall secure their possession of the land that you will see." So we remained in the valley opposite Beth-peor.

Joshua Overview

For forty years, the nation of Israel followed Moses, a devoted and extraordinary leader who, despite his shortcomings, deeply loved his people. Under his guidance, God delivered Israel from Egyptian slavery, disciplined them in the wilderness, and brought them to the land promised to their ancestors—Abraham, Isaac, and Jacob. Now, with Moses gone, his trusted aide, Joshua, is appointed to lead the Israelites into Canaan, the land of promise. The Book of Joshua chronicles Israel's conquest under Joshua's command, beginning with his divine commissioning as their new leader. It details his victories over the Canaanite kings, the distribution of the land among the tribes of Israel and concludes with Joshua urging the people to remain faithful to the Lord.

The relationship between Moses and Joshua is worthy of conversation, as is the intentional, God-ordained transition of leadership. Joshua was a faithful aide who journeyed alongside his predecessor. The moments Joshua spent watching Moses lead the people were formative to his development.

Another biblical example of a beautifully managed mentor-mentee relationship is that of Paul and Timothy. Paul and Timothy's mentorship relationship existed for a considerable amount of time and is clearly depicted in the New Testament. It was not an accidental arrangement, neither was it forcefully done under the pressure of time. Their relationship progressed incrementally, leading to Paul's mentoring of Timothy as a minister of the gospel. His approach was tactful, including carefully selecting and training the right person for the job, training him for ministerial tasks, communicating the value of their relationship, empowering him for success, and employing him for effectiveness. Paul was deeply committed to the dispensation of the Gospel and the furthering of the Church, hence his desire to see the continuance of ministry after the conclusion of his race.

I believe our love for the Church is not limited to our earthly devotion to it. Planning for the success of the ministries we are connected to does not end with us. Succession planning, leadership development, and transitions are God's intentions for the Church. It can be scary or off-putting to consider our own mortality, but it is also realistic. We do not possess the ability to slow, pause, or prolong time. Part of our earthly assignment is pouring into whoever comes next. Paul recognized the importance of equipping a successor to carry on the Gospel message after his life and ministry were

over.[6] Specifically, Paul believed that his life was nearing its end, stating, "I am already being poured out like a drink offering, and the time has come for my departure. I have fought the good fight, I have finished the race, I have kept the faith" (2 Tim. 4:8). To leave his earthly ministry without establishing a means for its continuation would contradict his overarching message to Timothy, which was to be strong in the preaching of the Word. He also encouraged Timothy to "discharge all the duties of your ministry," thus reminding Timothy to develop his own successor in the future. In finding his own successor, Paul sought the right man for the job, relying on the Holy Spirit's leading.

Progressive Baptist Church unexpectedly lost the long-standing leader of their church which is why there were no plans in place. This six-week study on addressing trauma, grieving, healing, and growing forward will provide biblical support and encouragement to all the members as we press forward to what God has in store for us. Progressive Baptist Church is uniquely positioned to be a successful church and a viable resource for members in the community if we can move forward.

Literary Context of Deuteronomy

The Book of Deuteronomy is to be understood backward; its significance is its summarizing and dosing of the foundational period. Deuteronomy signals that this period is over. However, this means that the book is also to be understood in the future. Its impact is not fully comprehended apart from reading the books that follow and sensing sharply that the word of the Lord in Deuteronomy is always set for future generations. The intentionality of the book prohibits it from ever being viewed as over and done, an

[6] Stacy E. Hoehl, "Paul and Timothy," Journal of Biblical Perspectives in Leadership, Regent University, https://www.regent.edu/journal/journal-of-biblical-perspectives-in-leadership/paul-and-timothy/

enterprise belonging only to the past. No other book of the Old Testament is so straightforward and self-conscious about its character as a guide for the future.

The substructure often noted in Deuteronomy is found in its character as a covenant document.[7] Features of the covenant formulary are clearly present in the book as a whole and are often in individual segments. Gerhard von Rad suggests that the book had an original cultic setting in life (now abandoned for the form of homiletic instruction), probably in a feast of covenant renewal.[8] His outline of the book suggests the cultic ties: historical presentation of the events at Sinai and paraenetic material connected with these events in Deuteronomy chapters one through eleven, the reading of the law in chapters 12:1–26:15, the sealing of the covenant in 26:16–19, and blessings and curses in chapters twenty-seven through thirty-four. On the one hand, the book is shaped or understood by what has preceded it.

Deuteronomy summarizes and ends the beginning period of Israel's history, the story of redemption and the formation of a people instructed by the Lord. The character of the book, as a kind of last will and testament of Moses, and its conclusion with the death of Moses signal the end of an era; future generations now have in this book the full story of how they came to be and what God wants of them. The foundations are laid. Nothing more is necessary. The Torah of the Lord is complete.

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[7] Miller, *Deuteronomy, Interpretation, a Bible Commentary for Teaching and Preaching*, 8–10.

[8] Gerhard Von Rad, "The Form-Critical Problem of the Hexateuch," in *The Problem of the Hexateuch and Other Essays*, trans. E.W. Trueman Dicken (Edinburgh, UK: Oliver and Boyd, 1966), 22-23.

Literary Context of Joshua

It may seem obvious, but it is important to note that the Book of Joshua is a narrative.[9] Distinguishing between story and narrative is important, even if in popular usage, these two terms are sometimes used interchangeably. Strictly speaking, the story is what happens, while the narrative is how that story is told.[10] An important question in the study of any piece of literature is "What type of writing is it?" Joshua is part of a "Deuteronomistic History," but in what sense is Joshua "history"? History writing in the ancient world did not approach the kind of academic exercise it is today. When reading Joshua, one will see the importance that the writer gives to showing how the Israelites prepared to take their promised land. After their conquering of the land, the writer then gives the historical sequence of how the land was separated and given to the twelve tribes.

The significance of the interpretation of Joshua is important in understanding how God fulfills his covenants to his people throughout time. The author gives information throughout the book to show the promises that were being fulfilled over time and the importance of the people obeying God's word.[11] The writer of Joshua uses the same historical view that the previous and following books did to show the connection to the Lord's people conquering the land that God had promised. Most importantly, the writer

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[9] David G. Firth, "Joshua," eds. T. Desmond Alexander, Thomas R. Schreiner, and Andreas J. Köstenberger, *Evangelical Biblical Theology Commentary* (Bellingham, WA: Lexham Press, 2021), 15.

[10] Jerome F. D. Creach, *Joshua, Interpretation, A Bible Commentary for Teaching and Preaching* (Louisville, KY: Westminster John Knox Press, 2003), 5–6.

[11] Stacy E Hoehl, "The Mentor Relationship: An Exploration of Paul as Loving Mentor to Timothy and the Application of This Relationship to Contemporary Leadership Challenges," Regent Universit*y*, https://www.regent.edu/journal/journal-of-biblical-perspectives-in-leadership/paul-and-timothy/.

uses this historical narrative to link together what Moses had previously written to the following historical books of the Old Testament. This shows that the writer would have been well-trained in writing historical narratives like that of Moses.

Cultural-Historical Context of Deuteronomy

Deuteronomy was written around 1406 B.C., at the end of the forty years of wandering endured by the nation of Israel. At the time, the people were camped on the east side of the Jordan River, on the plains of Moab, across from the city of Jericho (Dt. 1:1; 29:1). They were on the verge of entering the land that had been promised centuries earlier to their forefathers (Gn. 12:1, 6–9). The children who had left Egypt were now adults, ready to conquer and settle the Promised Land. Before that could happen, the Lord reiterated His covenant with them through Moses.

Contextually, the Book of Deuteronomy and Joshua somewhat resemble what is happening and has happened in Progressive Baptist Church. There was a strong leader who the people beloved before passing away, preceding a new, younger leader. Contrarily, I am not a "son of the church." I was not afforded the luxury of walking with my predecessor and being transitioned in, but like Moses, there was a promised land ahead, and unfinished work left behind when Progressive's pastor was called home. Long before my arrival, our church was located at 6120 N. Michigan Road. Under the leadership of my predecessor, Pastor Michael K. Jones, the Church moved to 4625 W 59th Street with the hope of building a sanctuary after constructing the gymnasium. When I arrived at Progressive, they had been worshipping out of the gymnasium for eighteen years. Although I have asked several times about the circumstances that slowed the

progression of building the sanctuary, much of what has been shared is unhelpful. The people who know the backstory refuse to discuss details, and the people who know little are eager to divulge what they believe to be pertinent elements.

Cultural-Historical Context of Joshua

The Jericho of Joshua is identified as Tell es-Sultân, ten miles north of the Dead Sea in the Jordan Valley, west of the Jordan River. Occupation of the city started in the ninth millennium B.C.[12] The Excavation of this site began with the work of Sellin and Watzinger in 1907, followed by John Garstang and then Kathleen Kenyon. The walls identified by Garstang as belonging to the fourteenth century B.C., and therefore possibly to the events of Joshua chapter six, were redated by Kenyon to a period several centuries earlier. The results of Kenyon's excavations left little in the way of remains that could be identified with the period of Joshua's entrance into the land, whether to the fourteenth century or to the thirteenth century B.C. Based on the pottery evidence, the site was destroyed circa 1550 B.C. It was not reoccupied in a substantial manner before the Iron Age, possibly not before the first millennium B.C. The only remains from the Late Bronze Age (1550–1200 B.C.) were three tombs with pottery dating from the fifteenth until the thirteenth centuries B.C. and traces of three structures on the Tell itself.

Since archaeology has played a significant role in evaluating the historical validity of the conquest story in Joshua, it is crucial to have some sense of how archaeology works. Firstly, archaeologists divide ancient history into broad periods

[12] Richard S. Hess, "Joshua: An Introduction and Commentary," vol. 6, *Tyndale Old Testament Commentaries* (Downers Grove, IL: InterVarsity Press, 1996), 150–152.

designated according to the primary materials used to make tools and weapons as humans evolved culturally.[13] The two broad periods that are relevant here are the Bronze Age (ca. 3200–1200 B.C.) and the Iron Age (1200–333). These are subdivided, respectively, into the Early (3200–2000), Middle (2000–1550), and Late (1550–1200) Bronze Ages and the Iron I (1200–1000) and Iron II (1000–333) periods. The dates are approximate, and the transitions from one period to another should be thought of as gradual rather than instant.[14]

Genre of Deuteronomy

The Old Testament Book of Deuteronomy is remembered as the fifth Book of Moses. Its name comes from the Greek meaning "Second Law." While Deuteronomy is a kind of retelling of the Mosaic Law, it is not an exact copy or a second law; it is better understood as an explanation of the Mosaic law to a new generation of Israelites about to enter the Promised Land. The author is focused on how this law should be applied once Israel is established and living in the Promised Land. Deuteronomy emphasizes a more socially practical version of the law, for example, in its emphasis on protecting widows, orphans, and foreigners in the land. This would be expected if the law was moving from theoretical and partial application in the wilderness wandering period to being fully adopted in a settled city life post-conquest.

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[13] Steven L. McKenzie, *Introduction to the Historical Books: Strategies for Reading* (Grand Rapids, MI; Cambridge, MA: William B. Eerdmans Publishing Company, 2010), 48.

[14] McKenzie, *Introduction to the Historical Books*, 49.

Genre of Joshua

The genre of the Book of Joshua is Narrative history. It was authored by Joshua, the leader of the Israelites, circa 1405-1383 B.C. It was written to assure the Israelites the living God will reward obedience, and to record the entrance and conquest of the promised land. Joshua demonstrates his faith in God as he follows the orders given to him and takes leadership of the nation. Joshua truly was "strong and courageous" (Jo. 1:7). In chapters one through four, Joshua and the Israelites enter the promised land, and in doing so, we read of an amazing entry featuring a miraculous crossing of the River Jordan and God showing His incredible grace to a prostitute named Rahab, the ancestress of King David.

In chapters five through twelve, Joshua follows God's orders and first conquers the center of the promised land. This includes the unlikely way they conquer the grand fortress of Jericho. God alone moved and conquered this impossible obstacle. The town of Ai followed, and although it took two tries to conquer the city, the first due to sin in the camp, God again moved and dominated. Next, the Israelites occupied the southern land and then the northern land to complete the occupancy; however, although they controlled the region, they never did completely conquer it.

Finally, in chapters thirteen through twenty-four, the land is divided up and distributed among the tribes of Israel. Some of the larger cities were placed aside for the Levitical priests who did not receive a portion of land due to their duties. Lastly, Joshua dies, but before he passes, he gives one of the greatest challenges that has been applicable to all generations, including our own: "Choose for yourselves today whom you will serve...as for me and my house, we will serve the LORD" (Jo. 24:15).

Parallel Passage

Dr. George L. Parks, Jr. challenged us during one intensive to find a parallel passage that thematically ran alongside whichever text we selected. One need not mention the other or be related in the way Jesus directly quotes excerpts from Isaiah, but the sentiment shared ought to be clearly present. I believe Acts 1:6-11 is the perfect parallel. The emotional complexity preceding the passage, the instruction to carry on the work embedded within, and the expectation to move forward all resemble the shift found in Moses. The disciples who were absent during the crucifixion surely heard stories of Jesus' final moments; it is probable they had witnessed another fall victim to the same. Even if they had not, crucifixion always has the same outcome. Knowing Jesus was dead, abandoning him, and denying him in his final hours must have been traumatic for them. Thankfully, Jesus honors his word, and his initial exit is not the only departure he has. Though they are temporarily separated he returns before preparing to depart once more.

The restorative moment of a returned Christ, albeit somewhat confusing, was ultimately received in celebration by his once passionate followers. His return brought renewal to the apprehensive and restored hope to the uncertain and the reality of his Divinity. Still, there were lingering questions. Much like his death, his upcoming ascension would leave the Disciples in familiar territory. Before he ascends, he does for them what God does for Joshua after the death of Moses. Jesus provides clear instruction, "But you will receive power when the Holy Spirit has come upon you, and you will be my witnesses in Jerusalem, in all Judea and Samaria, and to the ends of the earth" (Acts 1:8 NRSVUE). Death, the ultimate "ending"—the master fact that determines most of our horizons, values, and projects—has been ended in the resurrection of Christ. Luke's

"history" is the story of that new reality that has turned the world upside down, relativized all existing relationships, and enabled believers to live as people "between the times"—between the end of an old age held by the powers of death and evil and a new age where the future is still to be fully realized, still open-ended to the movements of the Spirit.

Neither trauma, grief, nor frustration terminates assignments. To experience these feelings is part of the human journey however, it does not appear these pitstops are intended to be places of permanence. Yes, Jesus wanted his disciples to stay put; his reasoning was not to wallow in sadness. Rather, it was to be empowered for the upcoming work.[15] The "passing of the torch" is common in the Bible as in the case of Moses passing the leadership role to Joshua (Num. 27:18–23; Deut. 34:9) or Elijah passing on the mantle to Elisha (1 Kgs. 19:16, cf., 2 Kgs. 2:13–15).

To the remotest part of the earth, Jesus also committed his mission to his successors, the apostles, and the scope of that mission was universal, as Luke subsequently shows in Acts, moving the transmission of the Gospel from Jerusalem to Rome, the capital of the empire. This is probably what Luke has in mind since the expression is found elsewhere as a reference to Rome. Ps. Sol. 8:1, for instance, describes God as bringing Pompey from "the end of the earth" (that is, Rome) to the land of Israel. This accords well with the conclusion of Acts that has Paul telling the story of God's salvation in Rome, and this is where the book concludes.

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[15] Lee Martin McDonald, "Acts," in *The Bible Knowledge Background Commentary: Acts–Philemon*, eds. Craig A. Evans and Craig A. Bubeck (Colorado Springs, CO: David C. Cook, 2004), 21–22.

Reflections, Significance and Exegesis

When a CEO dies, his or her employees and team must — in the wake of their grief — introduce a new leader, adjust to change, and continue to operate to the best of their ability. At the same time, they will likely attempt to preserve their late leader's legacy. The death of a leader may precipitate uncertainty and even instability in an organization, even if the death is health-related and expected.[16] Every leader called by God will have a season of service. Whether the conclusion of their service is marked by resignation, release, or return home, all leaders will likewise have an exit. Progressive Baptist Church was surprised by this reality.

Progressive is not the only church to lose a faithful leader. The children of Israel experienced the loss of their leader, and rather than changing the promise or allowing them to sort things out for themselves, the Lord planned on their behalf. Joshua was a faithful member of the Exodus congregation who dutifully served the former pastor, Moses, and followed the Lord. His faithful following led to his elevation upon the exit of Moses, and all that he gleaned in the years preceding his elevation was preparatory for his success.

I believe this model for transitional leadership is replicable, regardless of circumstance. Furthermore, the timetable that the people adhered to is likewise significantly more reasonable than what many modern-day ministries commit to following. Upon their exit from Egypt, Moses led hundreds of thousands of newly liberated people out of captivity and proceeded to the promised land of God. The

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[16] Tamara Rosin, “What Happens When a Leader Dies?,” Becker's Hospital Review, https://www.beckershospitalreview.com/hospital-management-administration/what-happens-when-a-leader-dies.html.

congregation he led was traumatized. They had recently been extricated from an acrimonious relationship with those in power. The people were exposed to plagues (that might not have impacted them physically but surely had psychological consequences) and at every turn chose rebellion and retreat rather than embracing the Lord's plan. Moses was God's chosen instrument. His calling story, which is documented in Exodus chapter three, is proof that the power of the Lord qualifies the unqualified. Ultimately, God can use anyone to carry out His will.

In the transition between Joshua and Moses, we see that God is not lazy or last minute but plans carefully. The shift in their leadership roles began long before Deuteronomy chapter thirty-four, and I would argue it was planned long before the births of Moses and his assistant Joshua. The passing of the torch is documented in Numbers chapter twenty-seven when God tells Moses to lay hands-on Joshua. For a transition to happen it requires God to designate a replacement. As church members, we might be participatory in the vote or requested to serve on the search committee, but God sends the pastor. For the children of Israel and Progressive Baptist Church, I believe a few things are necessary: a formal period of mourning and an acknowledgment and acceptance of new leadership. In Moses's case, the period was thirty days of mourning in the plains of Moab. The people wept and mourned for their former leaders. There are five helpful practices that we can use to center our focus on productive mourning. The first is to join in rituals. Memorial services and funerals are times to gather and can help people get through the first few days after a death. They are ways to honor the person who died.[17]

[17] D'Arcy Lyness, ed., "Five Ways to Cope When a Loved One Dies (for Teens) - Nemours Kidshealth," KidsHealth, https://kidshealth.org/en/teens/coping-grief.html.

Secondly, accept your emotions. Do not stop yourself from having a good cry if you feel the need to cry. Accept the feelings you have, rather than think you "should" feel a different way.[18] Third, talk about it when you can. Some people want to tell the story of their loss or talk about their feelings. However, sometimes people do not feel like talking. That is OK, too. No one should feel pressured to talk.[19] Fourth, preserve memories. You could do something to honor the person you love in a way that fits the life they lived. [20] Plant a tree or garden. Take part in a charity run or walk. Make a memory box or folder that has reminders of the person who has died. Finally, get the support you need.[21] It takes time to adjust after a loved one dies, and it helps to have plenty of support. You can get support from family, friends, or adult mentors in your life. Grief counselors, therapists, and support groups can also help.

It is often said in church circles that the acknowledgment of new leadership requires seven years to establish. I think that is horrible. The idea of “earning” congregational respect for an assignment God sent you to fulfill seems backward. If we unpacked scriptures regarding God’s reasoning for pastors and His intentions about the treatment of them, I feel things would change regarding this issue.

Finally, after we mourn, acknowledge, and accept new leadership, we will be able to boldly go forward into the promises of the Lord. What Joshua was able to do was

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[18] D'Arcy Lyness, ed., “Five Ways to Cope When a Loved One Dies (for Teens) - Nemours Kidshealth,” KidsHealth, https://kidshealth.org/en/teens/coping-grief.html.

[19] D'Arcy Lyness, ed., “Five Ways to Cope When a Loved One Dies (for Teens) - Nemours Kidshealth,” KidsHealth, https://kidshealth.org/en/teens/coping-grief.html.

[20] D'Arcy Lyness, ed., “Five Ways to Cope When a Loved One Dies (for Teens) - Nemours Kidshealth,” KidsHealth, https://kidshealth.org/en/teens/coping-grief.html.

[21] D'Arcy Lyness, ed., “Five Ways to Cope When a Loved One Dies (for Teens) - Nemours Kidshealth,” KidsHealth, https://kidshealth.org/en/teens/coping-grief.html.

started before he assumed a leadership role. Moses was a God-appointed leader who was worthy of respect. Celebrating our past leadership does not mean stalling and halting progression altogether. We serve a God of progress.

CHAPTER THREE

HISTORICAL FOUNDATION

Long before my pastoral journey began, I was a member. New Jerusalem, my home church, was a vibrant house of worship and still is today. However, my traumatic childhood experiences shaded my eyes from an otherwise radiant glow. The years preceding our church move were rough. Terrance James Bouie, my father, had a massive blood clot travel to his heart, resulting in his tragic death at age thirty-nine.[1] Black Americans may be less likely to receive life-saving treatments for blood clots and less likely to be admitted to the hospital in a more serious condition than white people. At the time, I was eight; my sister was three. Not long after his passing, there was a glimmer of hope. Unbeknownst to my father but somehow known by my grandmother, my father had a son before marrying my mother. His name was Jamal. This was the best possible news after my father's passing. At the time, I was the only male in the house; my Godbrother Jonathan lived across town, and my only biological sibling was my sister, Bria, who is five years younger than I am.

Meeting Jamal for the first time was an experience I cannot forget. He had our father's heavy Brooklyn accent, wore Jordan sneakers like me, and since he was nearly a decade older, he could serve as a placeholder for our recently deceased father. Granted,

[1] National Blood Clot Alliance, "Black Populations Are at Higher Risk for Blood Clots," Stop the Clot, https://www.stoptheclot.org/black-populations-are-at-higher-risk-for-blood.

these were less-than-ideal circumstances to meet, but eight-year-old me could not have been happier. They attended the funeral, but I refused to go. Until that point, the only death I experienced was Speedy, my beloved turtle. Peripherally, I was familiar with suicide; my "Uncle" Leroy took his own life, but he was not a frequent visitor, so his absence did not register, especially since nobody took the time to explain what suicide was and the internet did not exist.

From what I heard, the funeral service was lovely. The newness of a deceased father stung, but having an older brother eased the hurt. That elation quickly dissipated. Suicide emerged once more, and, on this occasion, it was not relegated to the periphery of my existence. Jamal committed suicide, and this time, the family explained what it meant. My father passed, my brother was gone, and the only living Bouie was my grandfather. Tony, my grandfather, never visited us. Later in life, I uncovered the truth. My father was his illegitimate son, my grandmother was his mistress, and my family served as a troubling reminder to his wife that her husband had been unfaithful. I only visited him once. Nevertheless, Papa Bouie was my grandfather, and at the time, these adult matters were known to me.

I called my grandfather after Jamal passed away. My inward loneliness prompted the call. Hoping to hear the voice of the only other Bouie I knew partially alleviated the grief. When Nana Row answered the phone, my grief was compounded. Papa Bouie passed away. If that were not enough, Nana Row, presumably because of spite, "forgot" to tell us. Standing in the family room, clutching the phone, I yelled out to my mother, "Papa Bouie is dead!"

Grief, trauma, loss, family dysfunction, and messiness were formative experiences for me, and my story is not the only one of its kind.[2] Grief is a natural response to loss. It is the emotional suffering you feel when something or someone you love is taken away. You may experience all kinds of difficult and unexpected emotions, from shock or anger to disbelief, guilt, and profound sadness. Countless families wrestle with addiction, physical abuse, imprisonment, divorce, poverty, academic disparities, and everything else in between. Unfortunately, most statistics argue that African American people are less likely to talk about it. We barely talk about it with each other. Therefore, the probability of conversations with a trained professional becomes infinitesimally slim.

Avoiding psychological baggage does not reduce the weight or lessen the number of bags. For many of us, we become bitter, enraged, semi-functional people who are one situation away from an explosive or implosive episode. Whether a grand spectacle or a manageable blow-up, the old statement rings true. Nikki Sixx, the co-founder and bassist of Motley Crue, said, “If you don’t deal with your demons, your demons will deal with you, and it’s gonna hurt.”[3]

Here is the question and the quandary... Where does unresolved baggage go? It goes everywhere that you go. The church is a trauma center for dysfunctional, misshapen, undeveloped, underdeveloped, and broken people. However, the challenge we face as divine diagnosticians serving in sacred hospitals is attempting to treat the right ailment

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[2] Melinda Smith, Lawrence Robinson, and Jeanne Segal, “Coping with Grief and Loss: Stages of Grief and How to Heal,” Help Guide, https://www.helpguide.org/mental-health/grief/coping-with-grief-and-loss.

[3] Zach Hargrove, “Six Six-Packs Of Nikki Sixx Quotes,” Live for Live Music, https://liveforlivemusic.com/features/nikki-sixx-quotes/.

with the wrong method. I have seen enough episodes of House and Grey's Anatomy to understand that the medicine administered is only as effective as the diagnosis provided.

Although I do believe God can and will do "immeasurably more than all we ask or imagine, according to his power that is at work within us" (Eph. 3:20), the application of this truth must not be divorced from other scripture or the intended context. Rather than misapplying this text and others to avoid the procedural developments associated with unpacked baggage, there must be an intentional shift to partner the pursuit of spiritual wellness with psychological wellness.

Sigmund Freud's work assists in bridging the chasm between the sacred and secular, particularly regarding unpacking previous psychologically traumatic experiences that are present impediments to growing closer to God. Sigmund Freud is a familiar name to many, if not all, who have considered therapy or taken Psychology 101. He is regarded as the father of psychoanalysis. Penis envy, The Oedipus complex, and penis envy are among the controversial findings, but psychoanalytic and psychodynamic therapy can be woven into the fabric of our faith tapestry.

Freud's Early Life

Freud was born in Frieberg, Moravia, in 1856, but when he was four years old, his family moved to Vienna, where he was to live and work until the last years of his life. In 1938 the Nazis annexed Austria, and Freud, who was Jewish, was allowed to leave for England.[4] For these reasons, it was above all with the city of Vienna that Freud's name was destined to be deeply associated for posterity, founding as he did what was to

[4] Stephen P. Thornton, "Sigmund Freud," Internet Encyclopedia of Philosophy, https://iep.utm.edu/freud/.

become known as the first Viennese school of psychoanalysis from which flowed psychoanalysis as a movement and all subsequent developments in this field. Nazi occupation of his beloved home was an atraumatic experience that distanced him from a safe space.[5] The Nazis professed an ideology, national socialism, that purported to champion the common man, whom they portrayed as a victim in a world controlled by Jews. Anti-Semitism and notions of German racial superiority were at the core of this ideology, which, in its particulars, was also a catalog of resentments that had accumulated in German society since November 1918. When Hitler finally became chancellor on January 30, 1933, it was not on the crest of a wave of popular support but as the result of backroom political intrigue by Schleicher, Papen, and the president's son, Oskar von Hindenburg.

Above all, Freud considered himself a scientist and would study broadly, hoping to cover the expanse of human understanding and knowledge. His later accomplishments did not overshadow having to leave behind everything he knew and loved. The remnant from the family's forceable exit were his aunts, uncles, nephews, and playmates, all gone. For the remainder of his years, Freud remained haunted by a sense of things that were irretrievably lost.

Freud's mother Amalia Malka Nathansohn Freud was twenty years younger than his father Jacob, who was forty when Freud was born. She was born on October 30, 1835, in Brody, which was then part of the Austrian Empire and is now in Ukraine.[6] Amalia

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[5] Peter John Heather and Henry Ashby Turner, "The Third Reich," Encyclopædia Britannica, https://www.britannica.com/place/Germany/The-Third-Reich-1933-45.

[6] Sigmund Freud, "A Childhood Recollection From "Dichtung und Wahrheit,"" *SE* 17 (1917b): 145-156.

married Jacob Freud, Sigmund's father, in 1855. Jacob was the patriarch of a large family; Sigmund whose name was originally Sigismund was the oldest of eight children. The children born from his father's first marriage were older than Amalia. There is unconfirmed evidence that Amalia was Jacob's third wife. He may have briefly been married to a woman with the first name of Rebekka between 1852 and his marriage to Amalia.

It is widely believed that the nexus of Freud's Oedipus complex was the strange, blended family dynamic family which left an indelible impression on Freud during the early years of his development. The Oedipus complex, as proposed by Freud, suggests that young boys experience unconscious desires for their mothers and perceive their fathers as rivals. According to a Freudian superstition now widely current, King Oedipus of Thebes was pursued by an unconscious desire to kill his father and violate his mother, and the Greeks told this myth with the sole purpose of showing that every little boy is an Oedipus at heart.[7]

It is essential to recognize that Freud's theories remain open to interpretation and are often a topic of debate. While no conclusive evidence directly links his relationship with his mother to the development of the Oedipus complex theory, the dynamics between Sigmund Freud and his mother, Amalia, have garnered significant attention in psychoanalytic studies. Freud himself explored the impact of early childhood experiences, particularly the mother-child bond, on an individual's later psychological development. However, scholars offer varying perspectives on how his personal

[7] Robert Graves, "The Oedipus Myth," *The Atlantic*, May 1955.

relationship with his mother may have influenced his theoretical ideas, leading to diverse interpretations within the field.

Amalia Freud died on September 12, 1930, at the age of ninety-four, in Vienna, Austria. The exact cause of her death is not widely documented, but given her advanced age, it's likely that she passed away from natural causes. Jacob Freud, his father, was born on April 24, 1815, in Tysmenitz, Galicia, which was then part of the Austrian Empire and is now in Ukraine.[8] Freud's father was a very dubious person. Nobody knows exactly how he made a living. He was a kind of a dreamer. When Freud's father moved the family to Vienna, they faced severe financial difficulties, with all their assets lost. The family found themselves living in what had once been the Jewish ghetto, constantly moving from one run-down residence to another. Over the span of fifteen years, they relocated six times. Jacob Freud, Sigmund's father, was unable to secure a permanent job, contributing to their unstable and impoverished living conditions.

The relationship between Sigmund Freud and his father, Jacob, has been a subject of interest among scholars and biographers. Freud himself wrote about his father in his autobiographical works, describing him as a hardworking and ambitious man who valued education and instilled a sense of discipline and determination in his children. However, Freud also acknowledged that his relationship with his father was complex. Jacob Freud's authoritarian parenting style and high expectations may have contributed to tensions within the family, particularly as Freud rebelled against his father's wishes by pursuing a career in psychology rather than law. Throughout his life, Freud masked his immense disappointment in his father. Although he did not question his father's authority or blame

[8] Benjamin Goodnick, "Jacob Freud's Dedication to His Son: A Reevaluation," *The Jewish Quarterly Review* 82, no. 3/4 (January 1992): 329, https://doi.org/10.2307/1454862.

him for the unexpected calamity that befell the family, casting a shadow over his childhood, there was quiet resentment. Until the day he died, Jacob Freud depended upon the generosity of people close to him to get by. Jacob Freud died on October 23, 1896, in Vienna, Austria, at the age of eighty-one. The exact cause of his death is not widely documented, but given his advanced age, it is likely that he passed away from natural causes.[9]

Freud's Education

Sigmund Freud attended primary school in Freiberg, Moravia (now Příbor, Czech Republic), where he grew up and later accepted the privilege to matriculate through a preparatory school in Leopoldstadt where he became proficient in Greek, Latin, history, math, and science.[10] Freud was very successful in school from an early age. At the gymnasium, which is the term for a preparatory school in countries such as Germany and Austria, he was first in his class for seven years. His outstanding performance during these preparatory years allowed Freud a variety of privileges, including exemptions from otherwise required examinations. It also led to privileges at home. According to Freud's sister Anna, Freud always had a designated study room to pursue academic improvement, regardless of the financial difficulties facing the family.

As Freud approached his college years, he initially planned to study law, following the path that many of his family members had taken. However, his academic

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[9] Peter Gay, *Freud: A Life for Our Time* (New York, NY: W.W. Norton and Company, 1988), 22.

[10] Mark Kelland, "A Brief Biography of Sigmund Freud, M.D.," LibreTexts Social Sciences, https://socialsci.libretexts.org/Bookshelves/Psychology/Culture_and_Community/Personality_Theory_in_a_Cultural_Context_(Kelland)/03%3A_Sigmund_Freud/3.02%3A_A_Brief_Biography_of_Sigmund_Freud_M.D.

interests took a dramatic turn after he encountered Charles Darwin's groundbreaking theory of evolution. Additionally, Freud was deeply influenced by Johann Wolfgang von Goethe's essay on nature, which sparked his curiosity about the workings of the human mind and the natural world. This combination of intellectual influences led him to shift his focus and pursue a medical degree, setting him on the path to become a pioneering figure in the field of psychoanalysis. His obvious academic superiority propelled him into the University of Vienna by age seventeen. Upon the completion of his degree, Freud continued forward to pursue a medical degree and Ph.D. in neurology.

He received his medical degree in 1881. As a medical student and young researcher, Freud's research focused on neurobiology, exploring the biology of brains and nervous tissue of humans and animals.[11] After graduation, Freud promptly set up a private practice and began treating various psychological disorders. Considering himself first and foremost a scientist, rather than a doctor, he endeavored to understand the journey of human knowledge and experience.

Freud's Critical Works

Sigmund Freud's written works revolutionized the landscape of psychology by introducing groundbreaking theories and concepts that fundamentally reshaped our understanding of the human mind and behavior. Some of his key works and their contributions include:

In *The Interpretation of Dreams*, Freud established the core principles of psychoanalytic theory and practice. He presented groundbreaking ideas about the

[11] Biography Editors, "Sigmund Freud Biography," The Biography, https://www.biography.com/scientists/sigmund-freud.

unconscious mind, famously describing dreams as the "royal road" to accessing unconscious thoughts and desires. Freud suggested that dreams are not random but rather contain hidden meanings that reveal suppressed emotions, internal conflicts, and forgotten memories. Central to his approach were techniques like free association and the interpretation of symbols, which became fundamental tools in psychoanalytic therapy.

In *The Psychopathology of Everyday Life*, Freud explored the phenomenon of "parapraxes" or Freudian slips—slips of the tongue, misreading's, forgetfulness, and other errors that reveal unconscious motives and conflicts. By analyzing these seemingly insignificant mistakes, Freud uncovered deeper psychological processes at play beneath the surface of everyday life, further illuminating the workings of the unconscious mind.[12] The book belongs to Freud's middle period, while still a passionate clinician reveling in free-associationism, and relatively unencumbered by meta-psychology. Written in 1901, published in 1904, it was first translated into English by Brill in 1914.

Three Essays on the Theory of Sexuality expanded Freud's theories on human sexuality, proposing controversial ideas that challenged prevailing Victorian attitudes. Freud developed the theory of psychosexual development, proposing that individuals progress through distinct stages in which the focus of libidinal energy shifts. This framework also led to his provocative concept of infantile sexuality, which asserts that even early in life, children experience unconscious sexual feelings. Central to this theory is the Oedipus complex, which suggests that children harbor unconscious desires for their opposite-sex parent while simultaneously experiencing rivalry and hostility toward their same-sex parent.

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[12] Arthur Asa Berger, "Sigmund Freud on Psychopathology in Everyday Life," *Perspectives on Everyday Life* (2018): 39–43, https://doi.org/10.1007/978-3-319-99795-7_6.

In *Beyond the Pleasure Principle*, Freud expanded his earlier theories by introducing the concept of the death drive (Thanatos) alongside the life instinct (Eros). He explored the complexities of human motivation and behavior, proposing that individuals are driven not only by the pursuit of pleasure but also by the compulsion to repeat and the instinctual drive toward destruction and aggression.[13] In *The Ego and the Id*, Freud elaborated on his structural model of the psyche, introducing the id, ego, and superego. He proposed that the psyche is divided into these three components, each with distinct functions and modes of operation. The ego mediates between the demands of the id, which operates on the pleasure principle, and the superego, which represents internalized moral standards and societal norms.[14]

In this work, *Civilization and Its Discontents*, Freud explored the tensions between individual desires and societal constraints, offering psychoanalytic insights into the sources of human unhappiness and the challenges of civilization. He examined the role of repression, sublimation, and aggression in shaping human behavior, as well as the psychological conflicts inherent in social living.[15]

In his final major work, *Moses and Monotheism*, Freud ventured into the realms of religion, mythology, and cultural history. While dying of cancer Sigmund Freud completed Moses and Monotheism in exile in London.[16] Started before Freud escaped

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[13] Sigmund Freud, *Beyond the Pleasure Principle*, trans. C. J. M. Hubback (London, UK: The Hogarth Press, 1961), 35-36.

[14] Freud, *Beyond the Pleasure Principle*, 35-36.

[15] Sigmund Freud, "Civilization and Its Discontents," trans. James Strachey, Hanover College History Department, https://history.hanover.edu/courses/excerpts/165freud.html.

[16] Harvey Belovski, "The Best: Moses and Monotheism," Tradition Online, https://traditiononline.org/the-best-moses-and-monotheism/.

Nazi-occupied Vienna, Moses and Monotheism is a radical re-reading of the life, origins, and religious leadership of Moses. Freud recasts Moses not as a born Hebrew raised in the pharaoh's palace (as per the Book of Exodus), but as an Egyptian. He asserts that following the death of the pharaoh, Moses led a small band of followers out of Egypt. He proposed a controversial psychoanalytic interpretation of the origins of Judaism and the figure of Moses, suggesting that Judaism emerged from the collective psychological processes of the Jewish people rather than divine revelation.[17]

Freud's written works not only transformed the field of psychology but also had a profound impact on numerous other disciplines, including psychiatry, anthropology, literature, and cultural studies. Despite ongoing debates and criticisms, Freud's theories continue to influence contemporary psychology and remain central to discussions of human nature, mental health, and society.

Freud authored numerous works spanning several decades, from the late nineteenth century into the early twentieth century. One of his most contentious publications, *Three Essays on the Theory of Sexuality* in 1905, introduced several groundbreaking and provocative ideas that challenged prevailing societal views on human sexuality. The book stirred considerable controversy, particularly due to Freud's exploration of infantile sexuality and the Oedipus complex—concepts that were regarded as scandalous and taboo at the time.

By addressing issues such as childhood sexuality, innocence, and family dynamics, Freud's work confronted deeply entrenched cultural norms. Despite the widespread opposition it faced, *Three Essays* played a pivotal role in altering

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[17] Sigmund Freud, *Moses and Monotheism*, trans. Katherine Jones (London, UK: The Hogarth Press, 1955), 85-87.

contemporary perspectives on human sexuality, laying the foundation for future advancements in psychoanalysis and psychological research.

Freud argued that sexuality begins in infancy and childhood, contrary to prevailing beliefs that children were inherently innocent and devoid of sexual feelings or desires.[18] He proposed that children go through distinct psychosexual stages, such as the oral, anal, and phallic stages, each characterized by the focus of libidinal energy on different erogenous zones. The basis of Freud's theory suggests that a person's body has several erogenous zones, believing a person's libido would grow over time and look for satisfaction through different types of behaviors using these zones, such as thumb sucking or sex. Depending on what happens in each stage, a person will quickly move from one stop to the next or develop fixations based on overindulging or disruption.[19]

The most controversial aspect of the book was Freud's discussion of the Oedipus complex, a theory derived from Greek mythology. Freud suggested that during the phallic stage of psychosexual development, young boys experience unconscious desires for their mothers and feelings of rivalry with their fathers. Similarly, he proposed the Electra complex for girls, where they desire their fathers and experience jealousy towards their mothers. Freud argued that unresolved conflicts stemming from these unconscious desires could have significant implications for adult personality and behavior.[20]

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[18] Kendra Cherry, “What Are Freud’s Stages of Psychosexual Development?,” Verywell Mind, https://www.verywellmind.com/freuds-stages-of-psychosexual-development-2795962.

[19] Kendra Cherry, “Freud's Stages of Psychosexual Development,” Verywell Mind, https://www.verywellmind.com/freuds-stages-of-psychosexual-development-2795962.

[20] Edward E. Smith, "The Psychodynamic Perspective," in *Noba Psychology Collection*, eds. Robert Biswas-Diener and Ed Diener (Champaign, IL: DEF Publishers, 2018), https://nobaproject.com/modules/the-psychodynamic-perspective.

Regarding the burning of Freud's books, it is not specifically known that his books were burned in masse as part of any organized campaign, as was the case with some other authors during certain periods of history. Freud's theories encountered considerable opposition and censorship across various social and political contexts, primarily due to their provocative nature. His ideas on sexuality, the unconscious mind, and his critiques of religion and societal norms were particularly contentious. Under the Nazi regime, Freud's works, along with those of many other intellectuals and Jewish authors, were banned and publicly burned as part of the regime's broader campaign to silence dissent and eradicate what it deemed as subversive thought.

Freud's Influences and Contemporaries

Sigmund Freud had several notable colleagues throughout his academic and professional career, including Josef Breuer: Freud's collaboration with Breuer on the case of Anna O. laid the groundwork for psychoanalysis and Freud's later theories of the unconscious mind. The collaboration between Freud and Breuer with Anna O, a pseudonym for Bertha Pappenheim, is considered one of the foundational moments in the development of psychoanalysis. This case study, detailed in Breuer and Freud's book *Studies on Hysteria*, provided crucial insights into the nature of psychological disorders, particularly hysteria, and laid the groundwork for many of Freud's later theories.[21] Hysteria is one of the oldest concepts in medicine, but since the 1950s, it has become increasingly muddled, ambiguous, and discredited and no longer appears in the

[21] R. E. Kendell, "Studies on Hysteria – An Overview," ScienceDirect Topics, https://www.sciencedirect.com/topics/psychology/studies-on-hysteria.

nomenclatures of either the American Psychiatric Association's Diagnostic and Statistical Manual or the International Classification.[22]

Anna O. was a young woman who suffered from a variety of disturbing symptoms, including paralysis, hallucinations, speech disturbances, and other physical and psychological ailments. Breuer, a Viennese physician, was her primary physician, and he employed a novel treatment method known as the cathartic method. The cathartic method involved allowing patients to talk freely about their symptoms and experiences while under hypnosis or a relaxed state. Through this process, patients would often recall forgotten or repressed memories and emotions associated with their symptoms. By bringing these unconscious conflicts into conscious awareness and expressing them verbally, the symptoms would often diminish or disappear—a process known as catharsis.[23]

Anna O's treatment involved Breuer listening to her recount her experiences, dreams, and fantasies while she was in a hypnotic state. Through these sessions, Anna O. recounted various traumatic experiences, conflicts, and fantasies from her past, including her feelings of resentment towards her father and her role as a caretaker for her sick mother. One of the most famous aspects of Anna O's treatment was her invention of the "talking cure." She would often refer to her therapy sessions as "chimney sweeping" or "flue cleaning," indicating the process of clearing out her mind of troubling thoughts and

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[22] G. E. Berrios and Roy Porter, "A Brief History of Hysteria: From the Ancient to the Modern," in *A History of Clinical Psychiatry: The Origin and History of Psychiatric Disorders*, eds. G. E. Berrios and Roy Porter (London, UK: Athlone Press, 1995), 272.

[23] Josef Breuer and Sigmund Freud, *Studies on Hysteria*, trans. James Strachey (New York, NY: Basic Books, 2000), 21–47.

emotions. This concept of verbal expression and catharsis became central to psychoanalytic therapy.[24]

Freud, a close friend and colleague of Breuer's, became intrigued by Anna O's case and its implications for understanding the nature of hysteria and other psychological disorders. Together, they wrote *Studies on Hysteria*, which detailed Anna O's case and several other case studies of patients with similar symptoms. From Anna O's case, Freud and Breuer formulated several key hypotheses and concepts that would shape the foundation of psychoanalysis. These included:

1. The role of unconscious conflicts and repressed memories in the development of psychological symptoms.
2. The importance of early childhood experiences and trauma in shaping adult psychopathology.
3. The concept of transference, whereby patients transfer emotions and attitudes from past relationships onto their therapists.
4. The therapeutic value of verbal expression and the "talking cure" in uncovering and resolving unconscious conflicts.[25]

While Freud and Breuer eventually went their separate ways, with Freud further developing psychoanalytic theory and practice independently, their collaboration with Anna O remains a landmark moment in the history of psychology. It demonstrated the power of psychotherapy to alleviate psychological suffering and provided valuable insights into the workings of the human mind.

Josef Breuer discovered that when he encouraged a hysterical patient to talk uninhibitedly about the earliest occurrences of the symptoms, the symptoms sometimes gradually abated. After much work together, Breuer ended the relationship, feeling that

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[24] M. Brentzel, *Sigmund Freud's Anna O. Das Leben der Bertha Pappenheim* (Leipzig, UK: Reclam, 2002), 28.

[25] Science Direct, "Studies on Hysteria," ScienceDirect, https://www.sciencedirect.com/topics/psychology/studies-on-hysteria.

Freud placed too much emphasis on the sexual origins of a patient's neuroses and was completely unwilling to consider other viewpoints. [26] As Freud advanced his theories, he continued to refine his arguments and build upon the insights of his peers. Among the many influential figures in his academic journey, Josef Breuer played a particularly pivotal role. Breuer introduced Freud to the concept of catharsis and the "talking cure," which became foundational to Freud's later development of psychoanalysis. While Freud engaged with and learned from numerous colleagues, his collaboration with Breuer was especially instrumental in shaping his early theories on the unconscious mind and the therapeutic process.

Sigmund Freud's professional relationships with Alfred Adler, Wilhelm Fliess, and Otto Rank were instrumental in the development and dissemination of psychoanalytic theory. Alfred Adler was an early associate of Freud who later diverged to establish his own school of psychotherapy, known as individual psychology. Adler's departure from Freud's circle marked a significant moment in the history of psychoanalysis, highlighting differing perspectives within the field. This schism is detailed in *The Letters of Sigmund Freud and Otto Rank*, which provides insights into the dynamics of Freud's inner circle during that period.[27] Wilhelm Fliess, a physician and close confidant of Freud, engaged in extensive correspondence with him about psychoanalytic theory and personal matters. Their interactions significantly influenced Freud's early theoretical formulations, particularly concerning the unconscious mind and psychosexual development. Although

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[26] Biography Editors, "Sigmund Freud Biography," The Biography, https://www.biography.com/scientists/sigmund-freud.

[27] Sigmund Freud, and Otto Rank, *The Letters of Sigmund Freud and Otto Rank*, eds. E. James Lieberman and Robert Kramer (Baltimore, MD: Johns Hopkins University Press, 2012).

specific details about Fliess are not directly cited in the provided sources, his influence is acknowledged in various historical accounts of Freud's work.

Otto Rank was a Viennese-American psychologist who served as Freud's protégé and colleague. Rank was a prolific and influential psychoanalytic author in the formative years of the movement, contributing to diverse fields such as art, music, literature, anthropology, history, science, and philosophy. His close collaboration with Freud is well-documented, and he played a significant role in the early development of psychoanalytic thought.[28]

The most famous of them all was Carl Jung. Initially, Jung was a close colleague and friend of Freud; he eventually developed his own theories divergent from Freud's psychoanalytic framework.[29] Jung was trained in psychiatry at Zurich's world-renowned Burghölzli clinic in Auguste Forel's program, which emphasized research in social and biological factors in psychiatric treatment. Jung's psychiatric research centered on the scientific investigation of phenomena of consciousness on a spectrum from conscious to unconscious, e.g., dissociation, splitting, and trance states.[30]

Their closeness diminished, and the relationship became distant after Carl Jung, who initially admired Freud's work, diverged from Freudian psychoanalysis to develop his own theories, including analytical psychology. Jung fundamentally diverged from Freud on several critical theories, particularly concerning the unconscious mind, the

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[28] Otto Rank, *Art and Artist: Creative Urge and Personality Development* (New York, NY: Alfred A. Knopf, 1932).

[29] Sam C. Naifeh, "The Life of Carl Gustav Jung (1875–1961)," *Carl Gustav Jung* 158, no. 12 (December 1, 2001): 1–38, https://doi.org/10.4135/9781446218921.n1.

[30] American Journal of Psychiatry, "Jung's Psychiatric Training and Research at Burghölzli," Psychiatry Online, https://www.psychiatryonline.org/doi/10.1176/appi.ajp.158.12.1973.

significance of sexuality, and the role of spirituality and mythology in human psychology. While Freud viewed the unconscious primarily as a reservoir of repressed desires, Jung proposed the existence of a collective unconscious that housed universal archetypes. Additionally, Jung rejected Freud's assertion that human motivation was primarily driven by sexual impulses, instead suggesting that psychic energy influenced behavior in a broader sense. Moreover, Jung placed great emphasis on spirituality and mythology, believing them to be essential to personal development, whereas Freud remained largely skeptical of their psychological significance.

In terms of patterning his work, Freud was influenced by many thinkers and disciplines, including philosophy, biology, and literature. Additionally, Freud was influenced by the works of philosophers such as Friedrich Nietzsche and Arthur Schopenhauer, as well as by the emerging fields of psychiatry and neurology in the late nineteenth and early twentieth centuries.

Freud's Famous Theories

Sigmund Freud's most famous theories revolutionized the field of psychology and continue to have a profound influence on our understanding of human behavior and the mind. Here's an overview of some of his most renowned theories: Psychosexual Development: Freud proposed that human personality develops through a series of psychosexual stages: oral, anal, phallic, latency, and genital. At each stage, different erogenous zones become the focus of pleasure, and individuals confront specific psychological conflicts. The resolution of these conflicts' shapes personality development. This theory highlights the importance of early childhood experiences in

shaping adult personality and behavior. The Structure of the Mind: Freud divided the mind into three main components: the id, ego, and superego. The id operates on the pleasure principle, seeking immediate gratification of desires. The ego mediates between the id's demands and the constraints of reality, operating on the reality principle. The superego represents internalized moral standards and societal norms, striving for perfection and morality.

The Unconscious Mind: Freud proposed that much of human behavior is influenced by unconscious motives, desires, and conflicts of which individuals are not consciously aware. He believed that unconscious thoughts and feelings could manifest in dreams, slips of the tongue (Freudian slips), and other forms of behavior.

Defense Mechanisms: Freud introduced the concept of defense mechanisms, unconscious strategies that individuals use to protect themselves from anxiety and psychological distress. Examples include repression (pushing painful memories into the unconscious), projection (attributing one's own unacceptable feelings to others), and displacement (redirecting emotions from an original source to a substitute target). [31]Anna Freud defined defense mechanisms as "unconscious resources used by the ego" to decrease internal stress ultimately. Patients often devise these unconscious mechanisms to decrease conflict within themselves, specifically between the superego and id. Psychodynamic therapy is used by clinicians to help orient patients to their own unconscious processes.

Psychoanalysis: Freud developed psychoanalysis as a method of therapy aimed at exploring the unconscious mind and resolving inner conflicts. Psychoanalytic therapy

[31] Ryan Bailey and Jose Pico, “Defense Mechanisms,” National Library of Medicine, https://www.ncbi.nlm.nih.gov/books/NBK559106/.

involves techniques such as free association, dream analysis, and transference, where patients transfer emotions and attitudes onto the therapist. The goal is to bring unconscious conflicts into conscious awareness and promote psychological insight and healing. Freud's theories gained popularity for several reasons:

- Innovative Perspective: Freud offered a novel and comprehensive framework for understanding human behavior, emphasizing the role of unconscious processes and childhood experiences.
- Clinical Success: Freud's therapeutic techniques proved effective in treating certain psychological disorders, leading to positive outcomes for many patients.
- Cultural Impact: Freud's ideas captured the imagination of the public and influenced numerous disciplines beyond psychology, including literature, art, and popular culture.
- Controversy and Debate: While Freud's theories were met with skepticism and criticism, they also sparked lively debate and further research, contributing to their visibility and influence.

In academic settings, Freud's ideas initially faced considerable resistance and skepticism, particularly from mainstream psychiatry and psychology. However, over time, psychoanalysis gained recognition as a legitimate approach to understanding human behavior and treating mental illness. Freud's ideas have since become foundational in psychology, influencing countless researchers, clinicians, and theorists, although they continue to be a subject of debate and revision within the field. His work on trauma evolved throughout his career, but some of his key insights can be found in his early

writings, particularly in his work *Beyond the Pleasure Principl*e and *Mourning and Melancholia.*

The Traumatic Event: Freud defined trauma as an experience that overwhelms the individual's capacity to cope, leading to feelings of helplessness and intense emotional distress. Trauma can result from various events, such as accidents, violence, loss, or abuse.

Repression and Unconscious Processes: Freud proposed that traumatic memories are often repressed, meaning they are pushed into the unconscious mind as a defense mechanism to protect the individual from the overwhelming emotions associated with the trauma. This repression prevents the direct recall of the traumatic event but does not eliminate its influence on the individual's psyche.

Return of the Repressed: Freud observed that repressed traumatic memories tend to resurface, often in disguised forms such as dreams, symptoms, or behaviors. He described this phenomenon as the "return of the repressed," where the unresolved trauma exerts its influence on the individual's thoughts, feelings, and behaviors. Trauma and Neurosis: Freud believed that unresolved trauma could contribute to the development of neurotic symptoms and disorders. He explored how traumatic experiences, particularly those occurring in childhood, could shape personality development and lead to psychological disturbances later in life.

The Death Drive: In "Beyond the Pleasure Principle," Freud introduced the concept of the death drive (Thanatos), which he proposed as a fundamental force alongside the life instincts (Eros). Freud speculated that traumatic experiences could

activate the death drive, leading to self-destructive tendencies or repetitive behaviors aimed at mastering or repeating the traumatic event.

Catharsis and Working Through: Freud emphasized the importance of confronting and working through traumatic experiences in therapy. He believed that by bringing repressed memories into conscious awareness and exploring their meaning and emotional impact, individuals could gain insight, find relief from symptoms, and achieve psychological healing.

Transference and Countertransference: Freud also highlighted the role of transference and countertransference in the therapeutic relationship when working with trauma. Transference occurs when the client unconsciously transfers feelings and attitudes from past relationships onto the therapist, while countertransference refers to the therapist's emotional reactions to the client. These dynamics can provide valuable clues about the client's internal world and help facilitate the therapeutic process.

Overall, Freud's conceptualizations of trauma laid the groundwork for subsequent developments in psychoanalytic theory and clinical practice, shaping our understanding of how past experiences influence psychological functioning and the importance of addressing trauma in therapy.

Freud's Later Years

In the final years of Sigmund Freud's life, he experienced both remarkable professional milestones and profound personal adversity. A pivotal development during this period was the rise of the Nazi regime in Austria, where Freud had long lived and conducted his work. As a Jewish intellectual, he became a target of escalating

persecution, particularly following the *Anschluss* in 1938, when Nazi Germany annexed Austria. Amid intensifying anti-Semitic policies and the growing threat to his safety, Freud and his family were compelled to leave Vienna. With the assistance of colleagues and supporters, they secured passage to London, where Freud spent his remaining years in exile, continuing his intellectual pursuits until his death.

Despite the upheaval caused by World War II and the loss of his home and professional belongings in Vienna, Freud continued his work in London. During this period, he focused on refining his theories, particularly his ideas on ego psychology and the structure of the human mind. Freud also continued to see patients and write prolifically, publishing influential works such as *Moses and Monotheism* and *An Outline of Psychoanalysis*.

However, Freud's health began to decline in the late 1930s, exacerbated by his lifelong battle with oral cancer. Despite multiple surgeries and interventions, his condition worsened, and he experienced significant pain and discomfort in his final years. Despite his illness, Freud remained intellectually active and engaged in his work until his death. Sigmund Freud passed away on September 23, 1939, at his home in Hampstead, London, at the age of eighty-three. He was buried in Golders Green Crematorium in London, following a simple and private funeral service attended by close family and friends.[32] Today, Freud's legacy looms large in the fields of psychology, psychiatry, and beyond.[33] Regarded as the father of psychology, Sigmund Freud was the founder of

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[32] Freud Museum London, “Sigmund Freud's Final Days and Death,” Freud Museum London, https://www.freud.org.uk/2019/09/10/freuds-death-bed/.

[33] Riya Yadav, “Sigmund Freud and Penis Envy – a Failure of Courage?,” The British Psychological Society, https://www.bps.org.uk/psychologist/sigmund-freud-and-penis-envy-failure-courage.

psychoanalysis and one of the most influential doctors of the twentieth century. He introduced new theories, changed the way people thought, and left an impact on the field of psychology seen even in the twenty-first century. However, Freud's legacy is not without controversy. Critics have raised questions about the scientific validity of his theories and the efficacy of psychoanalysis as a therapeutic approach. Additionally, Freud's views on sexuality, gender, and the role of childhood experiences in shaping adult behavior have been subject to criticism and reinterpretation, considering contemporary understandings of human psychology and social dynamics.[34]

Despite these critiques, Freud's impact on psychology and culture is undeniable. His ideas have permeated popular culture, influencing literature, film, art, and everyday language. Freud's emphasis on the importance of exploring the unconscious mind and acknowledging the role of early experiences in shaping personality and behavior continues to inform our understanding of human nature and the complexities of the human psyche.

[34] Iowa State University Pressbooks, "Freud's Psychodynamic Theory," Individual and Family Development, https://iastate.pressbooks.pub/individualfamilydevelopment/chapter/freuds-psychodynamic-theory/.

CHAPTER FOUR

THEOLOGICAL FOUNDATION

At Progressive Baptist Church, the sudden loss of Pastor Michael K. Jones served as a shared traumatic experience that had lasting effects on the congregation. Pastor Jones was fifty-two when he passed away. He served Progressive Baptist Church faithfully for over two decades, and his untimely passing was devastating. During his leadership, the church changed locations, and souls were won to Christ. People were baptized, eulogized, married, and ordained. He became a fixture in the church. As a result, any conversations about his life are suppressed, the mention of his name is infrequent, and the church is handcuffed to hardship because healing has not happened.

There are people who were so closely connected to him that they have not returned to the church because the idea of being present in the place he once served is far too painful. After his passing, the pictures of him that were hung throughout the church became more than a loving reminder of soldiers called to glory; they were shrines. Touching or moving anything remotely linked to his legacy was considered an infraction of the highest degree. Pastor Jones was a beloved figure in the city. He hosted a radio show and was a known musician, civic advocate, and friend to many. His death was followed by a pulpit vacancy of nearly two and a half years, which created “warring factions” in the house.

Prior to being called as pastor, the search committee was paused during their pursuit of pastoral candidates and later restarted for reasons unknown, but many presume the church was not ready to proceed. My problem statement is I believe poor succession planning and unresolved hurt after the loss of the previous pastoral leadership at Progressive Baptist Church resulted in administrative decline, leadership vacancy, an exodus of membership and a traumatized congregation. My hypothesis is if Progressive Baptist Church addresses previous hurt and seeks healing, we can implement God's blueprint for training burgeoning leaders, then the church will have strategies and procedures to satisfy seen and unforeseen leadership vacancies. Every problem has a solution. Yes, prayer is part of the solution, as is dialogue. I believe that we must also be intentional about creating a culture within Progressive Baptist Church that normalizes and prioritizes psychological wellness in sacred spaces.

What is Trauma?

Trauma is an emotional reaction to a terrible event. Although it is most discussed in the aftermath of tragedies like accidents, rape, or natural disasters, the truth is trauma can be anything that causes immense distress. Immediately after the event, shock and denial are typical and reasonable trauma responses. Longer-term reactions include unpredictable emotions, flashbacks, strained relationships, and even physical symptoms like headaches or nausea. While these feelings are normal, some people have difficulty moving on with their lives. Psychologists can help them find constructive ways of managing their emotions.[1]

[1] Kevin Rowell, and Rebecca Thomley, "Recovering Emotionally from Disaster," Psychology Today, https://www.psychologytoday.com/us/basics/trauma.

Trauma for everyone is different. What I perceive to be common or insignificant can be perceived as detrimental to another person. Therefore, a person's emotional response to a distressing experience is not something that should be scrutinized or slighted. It is nearly impossible to go through life without encountering some kind of trauma. Whether your actions or inactivity are the root cause, or you happen to be at the right place during the wrong time. Unlike ordinary hardships, traumatic events tend to be sudden and unpredictable, involve a serious threat to life—like bodily injury or death—and feel beyond a person's control. Most importantly, events are considered traumatic when the occurrence can undermine a person's sense of safety in the world and create a sense that catastrophe could strike at any time. Parental loss in childhood, auto accidents, physical violence, sexual assault, military combat experiences, and the unexpected loss of a loved one are commonly traumatic events.[2]

Although trauma covers a multitude of challenges, there are different categories. Acute trauma reflects intense distress in the immediate aftermath of a one-time event, and the reaction is of short duration.[3] Chronic trauma can arise from harmful events that are repeated or prolonged. It can develop in response to persistent bullying, neglect, abuse (emotional, physical, or sexual), and domestic violence.[4] Complex trauma can arise from experiencing repeated or multiple traumatic events from which there is no possibility of escape. The sense of being trapped is a feature of the experience.[5] Secondary or vicarious

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[2] Psychology Today Staff, "Trauma," Psychology Today, https://www.psychologytoday.com/us/basics/trauma.

[3] Psychology Today Staff, "Trauma," Psychology Today, https://www.psychologytoday.com/us/basics/trauma.

[4] Sarah Bence, "The Difference Between Acute and Chronic Trauma," Verywell Health, https://www.verywellhealth.com/acute-trauma-vs-chronic-trauma-5208875.

trauma arises from exposure to other people's suffering and can strike those in professions that are called on to respond to injury and mayhem, notably physicians, first responders, and law enforcement. Over time, such individuals are at risk for compassion fatigue, whereby they avoid investing emotionally in other people to protect themselves from experiencing distress. Adverse Childhood Experiences (ACE) cover a wide range of difficult situations that children either directly face or witness while growing up before they have developed effective coping skills. ACEs can disrupt the normal course of development, and the emotional injury can last long into adulthood.[6]

What is Trauma Theology?

It is impossible to minister to the traumatized without developing a theology of trauma. The study of trauma is not new. The rise of attention regarding trauma studies in other disciplines has resulted in a necessary impact on Christian theology. The lingering consequences of Covid 19 are credited in part for advancing the studies of how we interpret trauma and how to deal with life after it. Some Christian accounts of suffering have glaring limitations, and now theologians are seeking new interpretive directions.

Pastorally attuned, the theology of trauma is cautious about platitudes and how they may function in situations of trauma. Certain phrases capture whole theological systems: "It is God's will." "God is testing me." "This is my cross to bear." Theologians of trauma probe the theological themes underlying these platitudes. Whereas Christian

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[5] Sarah Peterson, "Complex Trauma," The National Child Traumatic Stress Network, https://www.nctsn.org/what-is-child-trauma/trauma-types/complex trauma#:~:text=Complex%20 trauma%20describes%20both%20children%27s,as%20abuse%20or%20profound%20neglect.

[6] National Center for Injury Prevention and Control, Division of Violence Prevention, "Fast Facts: Preventing Adverse Childhood Experiences Violence Prevention Injury Center, CDC," Centers for Disease Control and Prevention, https://www.cdc.gov/violenceprevention/aces/fastfact.html.

theology often approaches the topic of suffering through the classic framework of theodicy—making sense of evil within God's rule of the world—trauma theologians question this framework on pastoral grounds.[7] Theologians of trauma seek to avoid prescriptions regarding suffering because such prescriptions might lessen or undermine the reality of someone's suffering, push it below the surface, or sacralize suffering as a good in itself. Theologians of trauma do not seek to judge these platitudes as good or bad but rather to interpret the impact they have on those who hold them.

In this chapter, I hope to clearly express different biblical perspectives on trauma. Throughout scripture, there are several examples of biblical figures experiencing traumatic events. As preachers, it is possible to examine these passages theologically without considering the figure as a person who is dealing with a complex matter with psychological consequences. There have been moments when I have celebrated traumatic events because God worked them out for God without ever considering what the person might be feeling in the meantime.

Secondly, I intend to offer some theological reflections on trauma. I will examine the theological implications of trauma, discuss different theological frameworks and responses to trauma, and analyze how trauma challenges traditional theological concepts. Third, I plan to evaluate trauma and the church. To achieve the intended outcome, it is crucial to engage in conversations about how the church responds to trauma, while also acknowledging past mistakes. I will examine the limitations of the church's current

[7] Shelly Rambo, "Wounds That Don't Go Away," The Christian Century, https://www.christiancentury.org/article/critical-essay/how-christian-theology-and-practice-are-being-shaped-trauma-studies.

approach to trauma and explore ways in which it can improve its response to both trauma and those who are traumatized.

Finally, I want to consider the relationship between traumatic experiences and spiritual healing. There is an intersection between traumatic experiences, psychological growth, and spiritual wellness that needs to be stated. Spirituality is part of the healing journey. In the aftermath of trauma situations, those pursuing wellness need a guide on how to deal with the stressors of what has happened. The Church is a service industry. As such, we must lead the charge in assisting the wounded on their journey to healing.

Biblical Perspectives on Trauma

Bart Ehrman, the author of *Misquoting Jesus* argues there was a corruption of scripture by scribes. The "negligence" of the scribes, according to Ehrman, caused him to reject his somewhat conservative Christian viewpoint.[8] He also wrote *God's Problem,* and in it, Ehrman discusses the personal anguish he experienced after he discovered what he identifies as the Bible's incoherent explanations for suffering. The result of his wrestling with traumatic experiences that remained unresolved caused him to lose his faith altogether.

His initial scriptural exploration was limited to the New Testament, but he expanded his search to include much of the Hebrew Bible (Old Testament) while writing *God's Problem*. The core of his argument is that suffering is proposed poorly by the different biblical writers. According to the prophets, suffering is a punishment for sin. Others argue, suffering is a test, for which you are later rewarded for passing. Some

[8] Bart D. Ehrman, *Misquoting Jesus: The Story Behind Who Changed the Bible and Why* (San Francisco, CA: Harper San Francisco, 2005).

suffering is beyond comprehension, and since we are incapable of wrapping our minds around the mind of God, we do not understand. In Ecclesiastes, it is the nature of life, so we must suck it up and deal with it because eventually, God will somehow make right all that we perceive as wrong.

The reality is, from our human perspectives, we are limited in what we see and jaded as to how we perceive information. However, it does not mean that our trauma is not real. Our assessment of God's plan is generally viewed through our lives instead of considering ourselves part of a much larger, more complex network. Therefore, pain, suffering, and traumatic experiences appear to be contrary to the ideas we have about a sovereign God who is genuinely good and loving toward creation. We assume that God has neglected us or was unable to prevent whatever traumatic event we experienced from happening, or maybe He does not really love us.

When I think of what scripture has to offer regarding traumatic life experiences that rattle the soul, I think of Job. In the beginning of the Book of Job we are permitted to view a scene in heaven where Satan stands in the presence of God. In response to Satan's whereabouts, God inquires of Satan whether he had considered God's servant, Job. God had the utmost faith in His servant. However, Satan immediately accuses Job, a blameless man, of only fearing God because God had extended great favor to him. "There were born to him seven sons and three daughters. He possessed 7,000 sheep, 3,000 camels, 500 yoke of oxen, and 500 female donkeys, and very many servants, so that this man was the greatest of all the people of the east" (Job 1:2-3, ESV).

Job was living an enjoyable existence until this discourse with the Divine and the devil took place. Satan suggests that God "Strike everything he has," Satan says, "and he

will surely curse you to your face" (Job 1:11, ESV). God offers Satan restricted permission and allows Satan to test Job. It begs the question, why do the righteous suffer? Does God not know this moment would be a traumatic experience for His blameless and upright servant, Job? Or is God so confident that temporal things have no bearing on Job's wellness that immense loss would not disrupt his peace? Either way, this text leads to some interpretive hardship. These are the questions people have raised after Job loses his children, resources, and physical wellness. Later in his story, Job's three friends (if you want to call them that), Bildad, Eliphaz, and Zophar, arrive to "comfort" their friend and to converse about his crushing series of tragedies (Job 2:11).

Job's suffering is compounded, and the losses he's already dealing with worsen when his friends insist that his suffering is punishment for the sin he has committed in life. Despite the enormity of the weight, Job remains devoted to God through his trauma even though everyone around him, his wife included, contends that his life is not going to improve. Elihu, a fourth man, tells Job he needs to submit himself to God and show humility to God. As his life proceeds, Job questions God. He reaches a moment where too much has happened, and he needs answers. In response, he hears from the Lord about the sovereignty of God and the necessity of totally trusting the Lord. Thankfully, Job is restored to full health, his happiness returns after his prosperity is replenished, and everything he receives is greater than his earlier status (Job 42:10-17).

Although Job's story concludes with the rebuke of his friends and restoration of what was lost, we rarely here about the lasting impression of God in the mind of Job. We do not (at least I never have) speak about the collateral damage his situation causes. Yes, he is on the receiving end of all these things, but Job was a public figure, and his trauma

was not private. I can only imagine what going to the market must have been like after the Lord restored what was taken away. The murmurings of the people that were familiar with his story were likely part of his daily existence and there was nothing he could do about it. Even after having ten more children, I would wager that every time he looked in their faces, he was reminded of their siblings who were no longer living, which raises the question of a parent would Job have the heart to tell them about them. Beyond that, Job's awareness of God is high, but for someone who has not reached that place of confidence telling them about God and attempting to explain God's life considering the hellish ordeal that has just concluded, how does that work? Not to mention the likely friction between him and his wife after she suggested he "curse God and die!" (Job 2:9). Regardless of who you are, we all have, are, or will experience trauma, and we need to talk about it.

In Genesis 50:19-21 these words are recorded, But Joseph said to them, "Do not fear, for am I in the place of God? As for you, you meant evil against me, but God meant it for good, to bring it about that many people should be kept alive as they are today. So, do not fear; I will provide for you and your little ones." Thus, he comforted them and spoke kindly to them. Joseph acknowledges the wrongdoing of his brothers, identifies that God meant it for good, and assures them that they and their families will be taken care of. However, God using what was intended for evil for good does not change that Joseph had an experience that was traumatic! Joseph's hostile brothers planned to throw him into a pit because they had become tired of hearing his dreams, and they wanted to "see what will become of his dreams" (Gen. 37:20). Ultimately, their planning "assists" God's plan to deliver the fulfillment of the very dreams they were so sick of hearing and the worst or best part is that the dreams are a blessing to them.

When Joseph arrived to meet with his brothers, he did not suspect anything was the matter. He was ambushed, his brothers ripped the special robe his father had made for him, and the story proceeded downward. As is typical for victims of stress, this scene probably reenacted itself repeatedly in Joseph's mind for months to come. Not only in Joseph's mind, however, but in his actual experience of life.[9] God permits subsequent scenes in Joseph's life to stir up memories of this one. After being sold into slavery and being put to work under Potiphar's employ, his wife seizes his garment. In contrast, after God exalts Joseph, Pharaoh provides him the best garments. Trauma has a way of resurfacing. It impossible to outrun or escape it.

These instances are not limited to Joseph either. When Jacob, Joseph's father, sees his favorite son's robe torn up, he tears his clothes and mourns, as do his brothers when they suppose slavery awaits Benjamin. Joseph's suffering is the catalyst of grief to his father, and the fearfulness of Benjamin's possible suffering causes their father's further grief, which nudges his brothers toward the same fate. His trauma is now being shared by the entire family and this unspoken trauma develops into regret for their hastily and hate-filled choice to betray their brother. This running them of clothing, being the thread that ties their trauma together, is furthered when Joseph forgives them and offers each of them changes of clothes.

Again, like Job, we see the genesis of Joseph's trauma is God. The audacious claim God placed in the mouth of Joseph gets the ball rolling. It is asserted that dream interpretation belongs to God and to God alone. The dreams are not to be handled by

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[9] D. C. Keener, "Joseph Thrown into the Pit," Journey Online, https://journeyonline.org/joseph-thrown-into-the-pit/.

human wisdom, by imperial administration, or by analytical decoding. They are rather the in-breaking of other purposes known only in the mystery of God. Pharaoh, like every imperial master, presumes a monopoly on knowledge. However, in these dreams, knowledge is of another kind.[10] The dreams were given to Joseph, the dreams were tied to his brother's resentment of Joseph, and then, dreams are what open the door to liberation. It seems more cruel than ironic, honestly, and if I were Joseph, I would be terrified to go to sleep.

Evidence of his trauma is made noticeable when you consider in all his years separated from his family; it is never recorded that he reaches out to his father. James G. Murphy offers his thoughts on the matter. First, he does not know the state of things at home. Secondly, he may not wish to open the dark and bloody treachery of his brothers to his aged parent. But, thirdly, he bears in mind those early dreams of his childhood. All his subsequent experiences have confirmed him in the belief that they will one day be fulfilled. Yet, that fulfillment implies submission not only to his brothers but also to his father. This is too delicate a matter for him to interfere in. He will leave it entirely to the all-wise providence of his God to bring about that strange issue. Joseph, therefore, is true to his life-long character. He leaves it all in the hand of God and awaits in anxious but silent hope the days when he will see his father and his brethren.[11] The traumatic experiences Joseph endured isolated him from his family, led to lasting trauma for his

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[10] Walter Brueggemann, *Genesis, Interpretation: A Bible Commentary for Teaching and Preaching* (Atlanta, GA: John Knox Press, 1982), 322.

[11] James G. Murphy, *Notes on the Old Testament: Genesis* (Boston, MA: Estes and Lauriate, 1873), 465.

family, and shaped his perspective even though God was able to use it for good. His story does not conclude with chaos, but it does not cancel the calamity he experienced.

Theological Reflections on Trauma

There are three terms that are pertinent to this discussion, “the problem of evil,” “theodicy,” and “defense." The problem of evil and theodicy are typically used synonymously, but strictly speaking the problem of evil is the larger issue of which theodicy is a subset because one can have a secular problem of evil. Theodicy is a term that Leibniz coined from the Greek words theos (God) and dike (righteous). A theodicy is an attempt to justify or defend God in the face of evil by answering the following problem, which in its most basic form involves these assumptions: God is all good and all powerful (and, therefore, all knowing); the universe or creation was made by God and or exists in a contingent relationship to God; and evil exists in the world. Why? [12] Evil is understood as a problem when we seek to explain why it exists and what its relationship is to the world. Indeed, something might be considered evil when it calls into question our basic trust in the order and structure of our world.[13]

Peter Berger has argued that explanations of evil are necessary for social structures to stay themselves against chaotic forces. It follows, then, that such an

[12] Heinrich Schepers, “Zum Problem der Kontingenz bei Leibniz: Die beste der möglichen Welten,” in *Collegium Philosophicum: Joachim Ritter zum 60 Geburtstag* (Basel and Stuttgart, GER: Schwabe, 1965), 326–350.

[13] Barry L. Whitney, *Theodicy: An Annotated Bibliography on the Problem of Evil* (New York, NY: Garland, 1993), 1960-1990.

explanation has an impact on the whole person.[14] As David Blumenthal observes, a good theodicy is one that has three characteristics:

> 1.[I]t should leave one with one's sense of reality intact. (It tells the truth about reality.)
> 2. [I]t should leave one empowered within the intellectual-moral system in which one lives. (Namely, it should not deny God's basic power or goodness.)
> 3. [I]t should be as intellectually coherent as possible. (It is an answer that is both coherent and life-satisfying.)[15]

As Amélie Rorty notes, evil and its relationship to the world has been understood in the West in several ways, including the following:

> • The Neo-platonic: Evil as the privation or negation of the good or being, so that evil is only evil set against the greater good.
> • Theodicy and coherentism: Evil can be understood as part of or in relationship to God's larger plans for the cosmos.
> • Manichaeanism: Good and evil are equal conflicting powers expressing their opposition in human history.
> • Pious rationalism: Human reason cannot understand evil, but reason must postulate a God to explain human morality.
> • Pious fidiesm: Human reason cannot understand evil, so a leap of faith is required to trust in God.
> • Pessimism: Evil is real, but the world does not make sense nor can it be understood.
> • Non-existent: Evil does not actually exist; rather, human beings project their own subjective disapproval onto events and actions.[16]

If trauma theology is one side of the coin, healing theology would be the other. In Genesis, the Bible tells us something has gone wrong. Our earliest known ancestors deviated from God's intentions causing an otherwise loving relationship to become broken. On that dreadful day, creation was marred and the need for salvation arose.

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[14] Peter L. Berger, *The Sacred Canopy: Elements of a Sociological Theory of Religion* (New York, NY: Anchor Books, 1967), 95-106.

[15] David Blumenthal, "Theodicy: Dissonance in Theory and Praxis," David Blumenthal, http://davidblumenthal.org/Theodicy.html.

[16] Amélie Oksenberg Rorty, "Plato's Counsel on Education," *Philosophy* 73, no. 284 (1998): 157–178, http://www.jstor.org/stable/3752074.

However, God will not simply step in and by coercive force make things right. Love shapes God's activity; patient, long lasting, persevering love fuels God's response to wrongdoing. Genesis chapter one concludes, "everything…was very good". Then, Genesis chapter three tells of a break in the relationship between human beings and God. Genesis chapters four through eleven tells more of brokenness: Cain's murder of Abel, Noah and the Flood, the Tower of Babel. Something new emerges with Genesis chapter twelve. In the face of barrenness, God calls Abraham and Sarah to begin a community—and God makes this new beginning possible, giving Sarah a child. Thus begins God's strategy for healing as summarized in Genesis 12:3, "In you all the families of the earth shall be blessed."

God establishes a community of people who will know God. Through these people living together in a peaceable community, God will make peace for all the families of the earth. This healing strategy proceeds through the Old Testament and the New, culminating in Revelation chapters twenty-one and twenty-two. God's ultimate response to Adam and Eve's wrongdoing is not retribution but the restoration of wholeness characterized by the New Jerusalem. Considering most people are not readers of the Bible comprehensively, let alone contextually, systematic ideas such as this are sometimes lost in the Sunday morning shuffle. Trauma challenges what people think of God because, most times, people think of God one way at a time, and based on the interpretation of their experiences, it could be quite limited. Also, many people for the view of God regarding trauma without considering psychology as relational.

Although the relationship between psychology and the Bible is complicated, it is still worth discussing. The desire for simple answers is dismissed because those offered

do not seem to stand up to scrutiny. Trauma theology, as a result, is less straightforward than some people would like to believe. Understanding the complexity of this relationship creates a culture of critical thinking, not criticism, as our students begin to integrate the truth they find in the Bible with the concepts they find in the textbook.[17]

The maxim "All truth is God's truth" is not the weight-bearing expression of our program. The message behind this maxim is that psychological truths carry the same truth value as biblical truths because God reveals both. However, God does not always reveal both. Biblical truths are authoritative in ways that psychological concepts can never be. By believing that scripture speaks to the heart of people's troubles, we know that God has much to say about people's problems, including their psychological disorders.

Scripture is rich in description, explanations, and prescriptions. Psychology as an academic discipline does generate useful data and explanations about human behavior. The concepts that I think are useful and laden with truth still bear some imprint of a secular worldview. A counselor's biblical framework for thinking and counseling must be deeply and firmly rooted in the truths of scripture while well-informed by psychology.[18]

Trauma and Church

Gottfried Wilhelm Leibniz (1646–1716) was one of the great thinkers of the seventeenth and eighteenth centuries and is known as the last "universal genius." He made deep and important contributions to the fields of metaphysics, epistemology, logic,

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[17] Blog Team, "How Should Christians Interact with Psychology?," Cairn University, https://cairn.edu/how-should-christians-interact-with-psychology/.

[18] Blog Team, "How Should Christians Interact with Psychology?," Cairn University, https://cairn.edu/how-should-christians-interact-with-psychology/.

philosophy of religion, as well as mathematics, physics, geology, jurisprudence, and history. Leibniz proposed "The Principle of Sufficient Reason" (PSR) in its classic form is simply that nothing is without a reason (nihil est sine ratione) or there is no effect without a cause.[19] As Leibniz remarks, this principle "must be considered one of the greatest and most fruitful of all human knowledge, for upon it is built a great part of metaphysics, physics, and moral science" (G VII 301/L 227). In "The Principles of Nature and Grace," Leibniz suggests that the claim that nothing takes place without a sufficient reason means that nothing happens in such a way that it is impossible for someone with enough information to give a reason why it is so and not otherwise.[20] If the Church does not have an informed, biblically grounded, well-thought-out response to addressing trauma, a generation of people will become distant because the wrong people will provide reasons.

Traditionally, the Black Church was heralded as the haven for the lost. People would rush to the Church for answers to the perplexing questions they were presented with throughout the week, and it was a necessary relationship. The people benefitted from the Church, the Church blessed the people, and in return, people knew that there was one less stress-causing place in the world. Before the Black Church as we know it was established, the New Testament Church was an intimate gathering in the homes of believers. Pastor Jefferey Johnson asserts, "the Church at the earliest, was the Church at its best." I think in the intimate home environment, they discussed pertinent life issues,

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[19] Gottfried Wilhelm Leibniz, *Monadology and Other Philosophical Essays*, trans. Paul Schrecker and Anne Martin Schrecker (Indianapolis, IN: Bobbs-Merrill, 1965).

[20] Brandon C. Look, "Gottfried Wilhelm Leibniz," Stanford Encyclopedia of Philosophy, https://plato.stanford.edu/entries/leibniz/.

addressed their inquiries with scripture, and were permitted a safe space to wrestle theologically. The Church has grown, but the role has not changed. We must share the Gospel with those in need. We must address the issues people are facing, even if it means the answer, we offer is not the answer they want to hear.

Legally, there might be some limitations. People are literal and the consequences of biblical wisdom misinterpreted or misapplied could be cause for some chaos. Nevertheless, we should not avoid sharing, instead ensure that people we share with are clear by asking probing questions, chunking information to ensure digestibility and meeting with frequency. Another limitation is personal ability and understanding. Some people are not equipped to converse about such matters. In instances such as that, outsourcing is a phenomenal option as is collaboration. There are free resources available, grants, fellowships and partnerships that give concessions to churches.

The Church must address trauma and minister to the traumatized. Avoiding these challenging, potentially muddy, hard-to-discuss situations causes people to retreat to places that will. In response to not having sufficient help in the sacred space, Dr. Frank Thomas said, train, train some more, train again and repeat the process. We will only get better at responding to trauma by getting training for best practices on responses to trauma. Our consistency will lead to a shift culturally. The more normal these kinds of talks become, the more people will seek training and the more trained people we have, the fewer people that will silently live in trauma.

Trauma and Spiritual Healing

Spirituality is a broad concept with room for many perspectives. In general, it includes a sense of connection to something bigger than self, and it typically involves a search for meaning in life. As such, it is a universal human experience—something that touches us all. People may describe a spiritual experience as sacred or transcendent or simply a deep sense of aliveness and interconnectedness.[21] Some people find that their spiritual life is intricately linked to their association with a church, temple, mosque, or synagogue. Others may pray or find comfort in a personal relationship with God or a higher power.[22] Still others seek meaning through their connections to nature or art. Like your sense of purpose, your personal definition of spirituality may change throughout your life, adapting to your own experiences and relationships. Spirituality and trauma are interconnected because spirituality can be a source of healing for someone undergoing challenges rooted in trauma.

Considering the "looseness" traditionally associated with spirituality, there are some possible challenges to integrating spirituality and trauma healing. Tarot cards, palm readings, and other "dark arts" are viewed as spiritual. Centered chakras, crystal therapy, and trance meditative yoga are considered special but conflict with conventional Christian ideology. Clear boundaries on what Spirit we are following must be established early and stated often to ensure people are being led by the Lord. Jesus set forth prayer and fasting as two spiritual habits that served Him well in His ministry.

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[21] C. Pulchaski, B. Ferrell, R. Virani, S. Otis-Green, "Improving the Quality of Spiritual Care as a Dimension of Palliative Care: The Report of the Consensus Conference," *Journal of Palliative Medicine* 12 (2009): 886-904.

[22] D. Carlson, B. Leonard, "Spirituality in Healthcare," Center for Spirituality and Healing, http://www.csh.umn.edu/Integrativehealingpractices.

In Luke chapter four, Jesus inconspicuously steals away early in the day, before anyone else wakes to notice His absence, to a secluded place for prayerful communion with His Father. When it was day, he departed and went into a desolate place. The people sought him and came to him and would have kept him from leaving them, but he said to them, “I must preach the good news of the kingdom of God to the other towns as well, for I was sent for this purpose. And he was preaching in the synagogues of Judea” (Luke 4:42-44). The spiritual discipline of prayer was important to Jesus. It kept Him tied to the Father, strengthened Him, prepared Him, and encouraged His soul.

Fasting likewise is noteworthy. Matthew chapter four reads, “Then Jesus was led up by the Spirit into the wilderness to be tempted by the devil. And after fasting forty days and forty nights, he was hungry. And the tempter came and said to him, ‘If you are the Son of God, command these stones to become loaves of bread’” (Matt. 4:1-3, ESV). Before temptation took place, fasting happened. It is arguable that His resolve to refrain from temptation is made possible because of fasting.

I contend that our commitment to the Lord through fasting and prayer in collaboration with mental health treatment will prepare us to combat the ever-present reality of trauma. There is no way to avoid trauma; all we can do is prepare ourselves to combat it so we can live through it rather than live in it. Developing a theology of trauma is critical. There is nobody that has visited or will visit a church that has avoided going through things. Whether we are aware of it or not, we all have trauma. It can be as simple as being chased by a dog or as complex as being sexually assaulted by a loved one. To meet the present needs of the people we lead, training will be necessary, as is a deeper,

more meaningful awareness of what is present in the text, although it is not stated directly.

Fasting, then, is not merely an act of self-denial but a preparatory discipline that strengthens one's ability to endure and overcome adversity. It serves as a spiritual discipline that fosters resilience by aligning the body, mind, and spirit with divine sustenance rather than worldly dependence. This principle is evident in Jesus' experience in the wilderness, where fasting preceded a direct confrontation with the adversary. His physical hunger did not render Him weak; rather, it cultivated a spiritual fortitude that allowed Him to respond with unwavering reliance on the Word of God. In the same way, when we integrate fasting with prayer and holistic mental health practices, we engage in a transformative process that enables us to confront trauma with greater clarity and strength.

As the Church seeks to minister effectively in a world marked by profound suffering, a robust theology of trauma must be developed—one that acknowledges human brokenness while simultaneously pointing to the redemptive work of Christ. This requires both theological reflection and practical engagement. Pastors, counselors, and faith leaders must be equipped with the knowledge and resources necessary to walk alongside those navigating the depths of pain. Moreover, the Church must reclaim fasting, not as a ritualistic obligation, but as a sacred practice of spiritual empowerment, enabling individuals and communities to withstand life's inevitable hardships. Only through intentional theological inquiry, pastoral training, and spiritual discipline can the Church fulfill its mandate to be a place of healing, renewal, and transformation in the midst of trauma.

CHAPTER FIVE

INTERDISCIPLINARY FOUNDATION

When I was eight years old, I asked my father to take me to the park to play basketball. I loved my father and wanted to be just like him. He was a sports enthusiast. Naturally, my father agreed, and we got ready to shoot some hoops. We went to The Belafonte Tacolcy Center, where my mother worked. It was a decent park, and we had the courts to ourselves. He went up for a layup or dunk, I no longer remember which, but when he landed, he injured himself. The result was a broken leg. I went inside to wait with my mother; my father drove himself to the hospital, and upon his return, he had a cast on his leg. At the time we were not aware that the cast given was too high and negatively affected his circulation. The celebratory day the cast was removed became tragic not long after. Randomly, my father collapsed at our front doorstep; my Uncle Cecil was there, so he called the ambulance, but my father died en-route. When my mother and I arrived, I remember pleading with my father to wake up; he was gone. In my prepubescent mind, I decided it was my fault. If I had not requested, he play, he would never have broken his leg, needed a cast, or suffered a blood clot. I killed my father, and I ruined my family. At least, that is the conclusion I arrived at. I refused to attend his funeral. I regret it to this day; one of the few regrets I have.

My mother noticed I was struggling. I think because she was struggling too, it was obvious to see within me. Always the concerned parent, she signed me up for therapy. I

went weekly. Initially, I attempted to avoid talking, but my resolve was tested and ultimately overcome when games and snacks were introduced to our sessions. The doctor, whose name I do not recall, spent time talking to me about things that seemingly had nothing to do with my father. Our relationship developed slowly; it took some time to establish rapport, but when we did, things were running smoothly. The stigma surrounding mental health in the early 1990s is much less evolved than the perspective of today. In Miami, death was commonplace, especially in the areas I spent much of my time. Granted, my father died because of medical malpractice, but he was still gone. Friends of mine had full drawers of Rest in Peace t-shirts. Nobody really cried. People drank, smoked, slept, rose, and repeated the process until it was their time to occupy a shirt.

Looking back at my younger years, I now understand that the death of my father traumatized me. I had night terrors from the time I was eight up until my first year of seminary. Whether I woke in tears, screaming in fear, or violently shaking, my nightmares felt very real. My dreams are far less terrifying these days, but the panic attacks are still very real. Less than a month ago, my wife asked me to put my son down to sleep. My fearfulness of aging was exacerbated by the thoughts of my rapidly growing son, and it reminded me of my temporal reality. I panicked badly! I darted out of my son's room, closed my door and while tears ran down my face, I pleaded with my wife to rock him to sleep. Trauma is real. It sits with all of us, it has no expiration date and has the tendency to show up uninvited. That is why therapy is imperative.

In simple terms, Sigmund Freud suggests that human behavior is influenced by unconscious memories, thoughts, and urges. This theory also proposes that the psyche

comprises three aspects: the id, ego, and superego. The id is entirely unconscious, while the ego operates in the conscious mind. The superego operates both unconsciously and consciously.[1] Talk therapy, arguably Freud's greatest contribution to the discipline of psychology, also known as psychotherapy, is founded on the idea that conversing about things that are bothering you has the potential to assist you in dealing with emotional distress. There are talk therapists who are devotees to specific schools of thought, such as behaviorism or cognitive theory. Others talk therapists employ more eclectic approaches, allowing them to implement principles and techniques from a myriad of theories.

Interdisciplinary Interaction with Project Theme

At Progressive Baptist Church, the sudden loss of Pastor Michael K. Jones served as a shared traumatic experience that had lasting effects on the congregation. Pastor Jones was fifty-two when he passed away. He served Progressive Baptist Church faithfully for over two decades, and his untimely passing was devastating. During his leadership, the church changed locations, souls were won to Christ, and people were baptized, eulogized, married, and ordained. He became a fixture in the church. As a result, any conversations about his life are suppressed, the mention of his name is infrequent, and the church is handcuffed to hardship because healing has not happened. I believe that we as a church need to engage in a series about trauma.

Psychoanalytic and psychodynamic psychotherapies help people to improve their lives by gaining a better understanding of how they think and feel. Talk therapies can help create better relationships, more manageable emotions, and the ability to make better

[1] Kendra Cherry, "Sigmund Freud's Psychoanalytic Theories in Psychology," Verywell Mind, https://www.verywellmind.com/freudian-theory-2795845.

life choices. These therapists have been through therapy themselves, and they know what it is like to work through emotions and things in life that are hard to face.[2] Conversation based types of therapies were designed to help people to feel steadier and more stable with other people, to bolster life and creative faculties, and to develop a rebound mentality when life gets tough. Therapy can be short-term or long-term, you can attend as an individual, group, couples, or families. Therapy is applicable for every age group, ethnic group, gender, race and sexuality, no matter their economic situation or religious affiliation.

What happened in the life of our church was a traumatic event. The effects of his passing are still felt today and are not limited to our church members. Pastor Jones was a tenured pastor who was present, active, and involved one day, then gone the next, which left many people traumatized. Trauma is an emotional reaction to a terrible event. Although it is most discussed in the aftermath of tragedies like accidents, rape, or natural disasters, the truth is trauma can be anything that causes immense distress. Immediately after the event, shock and denial are typical and reasonable trauma responses. Longer-term reactions include unpredictable emotions, flashbacks, strained relationships, and even physical symptoms like headaches or nausea. While these feelings are normal, some people have difficulty moving on with their lives. Psychologists can help them find constructive ways of managing their emotions.[3]

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[2] American Psychological Association, "Psychoanalysis in Psychology," APA, https://www.apa.org/ed/graduate/specialize/psychoanalytic.

[3] Kevin Rowell, and Rebecca Thomley, “Recovering Emotionally from Disaster,” Trauma Psychology Today, https://www.psychologytoday.com/us/basics/trauma.

In this chapter, I want to clearly define Psychoanalytical and Psychodynamic Psychology. Both disciplines are related and offer perspectives that should be considered regarding the healing of hurting people. Collaboratively, Psychoanalytical and Psychodynamic Psychology applied in sacred spaces could serve as the catalyst to propel the Church's transition from stagnation to progression. Poor succession planning and unresolved hurt after the loss of the previous pastoral leadership at Progressive Baptist Church resulted in administrative decline, leadership vacancy, an exodus of membership and a traumatized congregation. Knowing the genesis of our struggle, it would be insane attempting to forge forward without addressing the elephant that has been living in our sanctuary.

I also would like to engage what the Bible has to say about talk therapy and seeking mental health treatment. I believe there are passages that speak about the preservation of our minds and moments in Holy writ when intentional moments were taken that were helpful for formative spiritual and mental wellness. Although talk therapy was not a term that was coined until much later, the components of it were present long before it was named. When Jesus gathers with His disciples in the upper room, mind overrun with the upcoming hardship of crucifixion, was this a decompression session for the Divine? When Job talks to his friends after losing everything he has, were these talk therapy moments that this traumatized servant wanted relief from? How about Jonah? He was swallowed by a situation that he was the cause of, but before he is thrown overboard, he discusses with those aboard the complexities of his calling; that sounds like therapy and lightens the load to me.

Considering this is somewhat new for us, there could be some sensitivity around the subject. Therefore, I want to highlight the stigmas surrounding receiving psychological treatment, address possible apprehensions about inviting an outside agency inside the Church, and discuss possible frictions that psychology raises that must be discussed in a religious setting. Psychology, specifically psychotherapy, is one of the most controversial issues in the church today. Psychology has adopted the scientific method, but that method cannot be consistently applied to its field of study. The theories that have developed from psychological research have given rise to three major schools and literally hundreds of psychotherapies (which are often unscientifically mixed in practice). Many Christians believe the church has abandoned them and consequently turn to psychology.[4] Some Christians argue that psychology is a rival to religion; others believe that the inclusion of psychological principles into biblical counseling is essential, while some debate that neither extreme is accurate. All sides must be heard.

Lastly, in addition to talk therapy, how can we incorporate Psychoanalytical and Psychodynamic practices into Sunday morning messages, Bible Studies, and the culture of the Church? This practice must not be done with singularity in mind. Instead, my hope is that the addition of these disciplines will be part of an ongoing effort to maintain congregational wellness. Since trauma is ever-present, our practice of conversing through traumatic issues should likewise continue. The moment it becomes normal, I plan on celebrating!

For us to succeed, Progressive Baptist Church's commitment to the Lord through fasting and prayer will be critical. However, the collaboration with mental health

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[4] Bob Passantino and Gretchen Passantino, "Psychology and the Church (Part One)," Christian Research Institute, https://www.equip.org/articles/psychology-and-the-church-part-one/.

treatment will prepare us to combat the ever-present reality of trauma. Every previous pastor in our church's history has passed. We have founding members who are alive and fondly remember each of them and hearing their stories emphasizes the need for talk therapy. There is no way to avoid trauma; what we can do is prepare ourselves to combat it and ready ourselves to live through it, but avoiding traumatic experiences altogether is an impossibility. I can only imagine how different the landscape of our church would be if all of us independently committed to therapy and collectively engaged in meaningful conversation. The tools we learn from therapy would create a safe space to talk to and hear from one another, making the ignored feel seen and understood.

What is Psychoanalytical Theory?

I would like to preface the address of Psychoanalytical Psychology with a look at Psychoanalytic Theory. Psychoanalytic Theory conjectures that all mental life exists on two levels: within the realm of consciousness and the unconscious, a Freudian concept. Psychoanalytic therapy is nonstructured and focuses on the etiology of emotional suffering and centers on self-reflection and examination as critical elements in treatment. Several case studies and one small randomized clinical trial by Leichsenring and colleagues suggest that there is a role for psychodynamic therapy in the treatment of anxiety.[5]

Psychoanalytic theory understands psychopathology within a developmental framework. Mental disorders like depression are seen as rooted in the individual past of a

[5] Alishia R. Moreland-Capuia et al., "Fear-Related Anxiety Disorders and Posttraumatic Stress Disorder," in *Neurobiology of Brain Disorders*, 2nd ed. (Cambridge, MA: Academic Press, 2022), 72, https://www.sciencedirect.com/science/article/abs/pii/B9780323856546000058.

patient, that is, either as a residue of early experience or as the expression of primitive modes of psychic functioning. Within this framework, psychoanalytic concepts focus on the consequences of early interactions with significant others. These are thought to not only influence the development of psychic functioning but also build up the content of the individual self.[6] Who we are is based on the subjectively experienced parts of our mind, soul, or spirit, depending on the language you prefer, which are seen as a collection of representations. The representations are the byproduct of memories from past interactions with people that shaped how we experience others and ourselves presently. Representations function as schemas that operate below consciousness, part of the implicit memory. Whenever an individual takes part in a social interaction, representations serve as a knowledge base and form expectations.[7]

I relate my thoughts about Psychoanalytic Theory similarly to how I understand subliminal messages. Subliminal messages are visual or auditory stimuli that the conscious mind cannot perceive, often inserted into other media such as television commercials or songs. This kind of messaging can be used to strengthen or heighten the persuasiveness of advertisements, or to convey an altogether different message entirely.[8]

We might not remember every experience we have ever had, but our brains are infinite storage spaces. There are times when our brains will suppress things to protect us from hurt. Memories that have been forgotten, at least those we are unable to consciously

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[6] Svenja Taubner, "Working with Unconscious and Explicit Memories in Psychodynamic Psychotherapy in Patients with Chronic Depression," in *Hurting Memories and Beneficial Forgetting* (Cambridge, MA: Elsevier, 2013), 12, https://www.sciencedirect.com/science/article/abs/pii/B9780123983930000134.

[7] Taubner, "Working with Unconscious and Explicit Memories," 26.

[8] Dan Shewan, "Six Examples of Subliminal Advertising, from Spooky to NSFW," WordStream, https://www.wordstream.com/blog/ws/2017/10/24/subliminal-advertising.

retrieve, are not lost. Instead, they are intentionally so far back that we would have to sift through storage to recall them. Subliminal messages are hidden, but the brain catches them. Songs can stir them up, words can bring them to the forefront of our minds, and we can be drawn to a feeling without insight as to why. Every experience we have shaped us. How we represent ourselves today is informed by a collection of yesterdays. If we are not careful, we can present behaviors that are not fully representative of who we desire to be.

What is Psychoanalytic/Psychodynamic Psychology?

The psychodynamic/psychoanalytical psychology or perspective is not just related to the behavior an individual engages in, but it also seeks to answer why they engage in it. According to this perspective, reason pushes forward everything an individual does, and propelling reasoning is related directly to an occurrence in that individual's past, whether they are aware of it or not. Understanding the incident that previously occurred opens the possibility of adopting healthy ways to overcome previous trauma in the present day. When Sigmund Freud developed the idea of psychoanalysis, which later evolved into psychoanalytical/psychodynamic psychology, he echoed the belief that our unconscious motivations and the thoughts of individuals directly correlate with the way they behave in their conscious actions. Therefore, for individuals who have undergone trauma in their childhood, their behavior would be impacted well into adulthood and throughout their lives. Our childhood memories could potentially be classified as positive or negative. Nevertheless, the effect on the individual could still manifest in a negative way.

Applying Freudian rationale to our church, it is easy to understand why the tension we experience during heightened emotional moments evokes different responses throughout our congregations. Especially when considerations are made for moments happening today that resemble moments that have previously taken place. For some, church meetings serve as emotional triggers that forcefully drag them down memory lane. The initial memory is not a favorable one, and that negative emotion, compounded with the unresolved hurt that the pastor presents for it is no longer around, must be overwhelming. Avoiding the discourse around sensitive or favorable topics can lead to explosive behavior that has toxic consequences for people we profess to care for.

Freud argued that by delving into the unconscious mind, a person could potentially unlock their unconscious memories and motivations. By doing so, that person would be able to overcome problems that were expressed through depression or anxiety disorders. To become a healthy, functioning, contributing adult, Freud believed unleashing all the repressed thoughts and feelings was necessary and was the precursor to healing and advancement. Quite frankly, the idea of unpacking years, maybe even decades' worth of repressed memories sounds terrifying. It certainly is not an endeavor to be approached half-heartedly or devoid of commitment to completion. Likewise, dealing with trauma, repression, and regression is labor that will require a professional.

What Does the Bible Say?

What does the Bible have to say about talk therapy, seeking mental health treatment, and dealing with our heaviness? There are several passages in the Bible that are about people experiencing trauma and dealing with the aftermath of it. Whether the

traumatic experience was a direct result of their disobedience, someone else's actions, or reasons unbeknownst to us, the Bible has no shortage of trauma cases. In Genesis chapter twenty-two, Abraham and the Lord speak about his son Isaac. The Lord evaluates the depth of Abraham's love and instructs him to sacrifice his son. It never happens because God had no intention of allowing the boy to die, but nobody really discusses what Isaac must have felt after. The enduring image of his father preparing to plunge a blade into him must have been deeply traumatizing. God was speaking to Abraham, but what if only Abraham could hear His voice? In that case, Isaac might have believed that his aging father had lost his grip on reality and descended into madness. I love that story, which is why I use it as a lighthearted yet serious example. There is a need for talk therapy, mental health treatment, and a safe space to unpack our heaviness but, since the Bible does not explicitly tell us to find a therapist, what does scripture say that endorses the pursuit of mental health?

Listen to the words found in James 5:13-16:

> Are any among you suffering? They should pray. Are any cheerful? They should sing songs of praise. Are any among you sick? They should call for the elders of the church and have them pray over them, anointing them with oil in the name of the Lord. The prayer of faithful person will save the sick, and the Lord will raise them up; and anyone who has committed sins will be forgiven. Therefore, confess your sins to one another, and pray for one another, so that you may be healed. The prayer of the righteous is powerful and effective (Jas. 5:13-16).

The book of James has the trappings of an Old Testament book that has a New Testament cover. The focus of James is consistent: devote your attention to practical actions in your faith life, which draws reminiscent elements from the wisdom literature in the Old Testament. James encourages the people of God to behave like God's people. Throughout the Book of James are direct commands for us to pursue a life committed to

holiness devoid of excuses. According to James, for Christians to be Christians, there must be evidence of their faith manifest in their walk. If our faith does not produce tangible evidence of a change in life, that faith is utterly worthless.

In the above passage, quite a few things are addressed. However, only the third circumstance, illness, is treated in more detail. The first two life situations—bad and good circumstances—are treated very generally. But the question which is dealt with throughout is: How must the Christian, if he is devoted to the practice of religion, react to such situations in life?[9] I believe the correlation to Psychoanalytic/psychodynamic analysis is subtly made, but it is presented in the passage, which emphasizes the evidence of a changed life as a theme. The question is asked about suffering, which is a starting point for talk therapy. The question posed requires an introspective look. It is not superficial, and although the author answers it, it is a reference to therapy.

The two-part collaborative movement in the verses that follow also offers something for us to consider. For those who are sick, the author suggests they call the Elders of the Church for prayer. Traditionally, the elders refer to wise, stable, and dependable persons from the local congregation. The "call for" the Elders is a critical movement to note. The author is speaking strictly from the perspective of a concerned Gospel laborer. However, the call for elders is a call for wisdom and a call that requires the caller to acknowledge that help is needed. Certainly, the sick in the text has a physical malady but, studies show, mental distress can have physical manifestations. People living with mental illnesses experience a range of physical symptoms that result both from the

[9] Martin Dibelius and Heinrich Greeven, *James: A Commentary on the Epistle of James*, (Philadelphia, PA: Fortress Press, 1976), 251.

illness itself and because of treatment. Mental illnesses can alter hormonal balances and sleep cycles, while many psychiatric medications have side effects ranging from weight gain to irregular heart rhythms.[10] Furthermore, people with serious mental illnesses have a significantly increased likelihood of developing a range of chronic respiratory conditions, including chronic obstructive pulmonary disease (COPD), chronic bronchitis, and asthma.[11] Mental illness and physical illness can be related. Who is to say which causes the other? James emphasizes that those with illnesses call out to someone with the capacity to help.

The most obvious correlation to talk therapy, seeking mental health treatment and the necessity to address our heaviness healthily is found when James says, "Therefore, confess your sins to one another, and pray for one another, so that you may be healed" (James 5:16). Confession requires conversation. The act of sharing is tied to the act of praying because people who have no idea what is happening with you are ill-equipped to pray with specificity for you. In church, whether it is for a celebratory reason, affirmation, confirmation, or relationship building, we understand that the words offered from our mouths have power. Mountain moving, miracle-working, and transformation power is in the tongue, but when it comes to our mental wellness, we tend to be silent. I believe Freud is arguing something quite like what James has already lifted: when you need help, say something!

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[10] S. B. Patten, "Long-Term Medical Conditions and Major Depression in the Canadian Population," *Canadian Journal of Psychiatry* 44, no. 2 (1999): 151-157.

[11] World Federation for Mental Health, "The Relationship Between Physical and Mental Health: Co-Occurring Disorders," WFMH, www.wfmh.org.

1 Peter 5:6-11 likewise offers a consideration worthy perspective:

> Humble yourselves therefore under the mighty hand of God, so that he may exalt you in due time. Cast all your anxiety on him, because he cares for you. Discipline yourselves, keep alert. Like a roaring lion your adversary the devil prowls around, looking for someone to devour. Resist him, steadfast in your faith, for you know that your brothers and sisters in all the world are undergoing the same kinds of suffering. And after you have suffered for a little while, the God of all grace, who has called you to his eternal glory in Christ, will himself restore, support, strengthen, and establish you. To him be the power forever and ever. Amen (1 Ptr. 5:6-11).

Regarding verse six, the focus has shifted from being humble within the community to accepting the humble status forced upon Christians by the rejection and hostility of the surrounding culture, a situation faced by all Christians of whom the author is aware.[12] Walking with Jesus is not a simple endeavor. Jesus demonstrated that walking as Jesus was nearly impossible and was made possible by His divinity and dependence upon the Lord's Sovereignty. Jesus proved that this walk is challenging, and even the most devout, devoted believers experience hardship, headaches, and hell on earth. Considering the heaviness embedded within the assignment, humility is necessary.

Life can be frustrating at times, especially when we find it hard to understand why people make the choices they do, but that does not mean we should dismiss them. By learning how to practice humility, we can begin to walk in our neighbor's footsteps. Humility teaches us that all humans are equal. This concept brings us more in tune with our spiritual side. We must look past our superiority and self-importance to find something greater than ourselves.[13] Knowing the will of the Lord is love which is

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[12] Paul J. Achtemeier, "First Peter: A Commentary on First Peter," ed. Eldon Jay Epp, in *Hermeneia—a Critical and Historical Commentary on the Bible* (Minneapolis, MN: Fortress Press, 1996), 338.

[13] Sarah Kristenson, "Eleven Ways to Practice Humility Throughout Your Life," Happier Human, https://www.happierhuman.com/practice-humility/.

essential to the development and maintenance of relationship. It is not unfathomable to suggest the devil represents dysfunction. The absence of humility disrupts love, it promotes dysfunctions and allows the devil, who is like a roaring lion to devour us. The discipline and attentiveness Peter presses for are critical. Suffering is an inevitability, but we can do something when we experience it. We are instructed to cast all our anxiety on Him. What a relief that is; we are not doomed to a heavy existence. Instead, we are given access to consistent relief. The God of Creation can restore, support, strengthen, and establish us.

The casting of cares Peter is referring to directs us to the Lord. There is no argument there. However, we know throughout scripture the Lord has used people as His representatives. People have delivered messages on His behalf, emancipated the masses at his behest, been presented to encourage those in need with a word from the Lord, and even assisted in carrying burdens. By no means do I think we should trauma dump on people, but I do believe God has uniquely qualified some people to assist us with the alleviation of our anxiety and varied cares. Therapy can help you uncover the underlying causes of your worries and fears, learn how to relax, look at situations in new, less frightening ways, and develop better coping and problem-solving skills. Therapy gives you the tools to overcome anxiety and teaches you how to use them.[14]

Biblical Foundation Interaction

In my Biblical Foundations Chapter, my focus was on the relationships between God, Moses, Joshua, and the children of Israel. After a foretold season of long-suffering

[14] M.A. Melinda Smith, "Therapy for Anxiety Disorders," HelpGuide.org, https://www.helpguide.org/articles/anxiety/therapy-for-anxiety-disorders.htm.

servitude, God raises Moses to extricate His people from the Pharaoh's oppressive regime. Although Moses wrestles with leadership apprehensions, which has likewise been one of the defining struggles of my pastorate, he is ultimately quite effective. Moses becomes their leader, a long-standing leader at that. The people must wrestle with their identity in God and of God during this preparation for their exodus, but after the final plague, it is obvious that their time in Egypt has reached expiration. Their exit is hectic. God arranges it but they have just witnessed natural disasters on a scale that I would wager they have never seen before. Bloody water, frogs, lice, livestock pestilence, boils, hail, locusts, darkness, and Egyptian genocide must have been mind-blowing to witness and live through.

The departure of God's people and others who exited along with them is halted by a sea. Stuck between mountainous terrain, they are trapped, and their need to move forward is exacerbated when Pharaoh's now hardened heart prompts him to pursue what he believes to be his property. Miraculously, God comes to their aid again. He had been leading them as a pillar by day, a cloud of fire by night, and now God demonstrates God's dominion over the sea. His people crossed on dry land and witnessed their former captors destroyed by the Lord.

They continue onward with Moses, and their fractures are made visible in their faithlessness. The people complain at every turn, and the reason does not have to be large. You would imagine that after seeing all that God is capable of, food, water, and lodging would be small concerns, but they are not, to them, at least. I wondered why they were stuck even though they had been triumphantly released. Then I realized Moses was attempting to lead wounded people who had not yet reconciled with their trauma. In

Egypt, they experienced mass murder of their sons, nephews, and grandsons without explanation. Their pain was never smoother, and their workload never lessened. They were demanded to make bricks without straw and once word of liberation began to circulate, the plagues began. Over four hundred years of oppression and death had now been ended with what should have been a victorious movement of the Lord, but nobody has talked about it.

Psychoanalytical therapy is necessary, even for those who have been extricated and have come to experience the Lord for themselves. All our experiences shape us. Therefore, as leaders of the Church, we must talk intimately and often with the leadership of trained professionals. As the children of Israel exited Egypt, God arranged that they would not depart empty-handed, which was great. However, the baggage they were instructed to bring is not the only baggage they carried out with them. Nearly all the time we share in sacred space is focused on the soul, we rarely talk about how the mind affects the soul and impacts the body. Psychanalytical and Psychodynamic psychology methods are tools that we as leaders should seek to add to our toolboxes and encourage those, we lead to seek to maximize their effectiveness likewise.

Moses' leadership is filled with God's orchestrated wins, but it is also riddled with friction, headache, dissension, dysfunction, disaster, and death. I often wonder how often he stopped to ask the people what was bothering them. The simple act of conversing about matters that are sitting on your mind helps to lessen emotional distress and the lifted weight of emotional stress precedes spiritual progress. By no means am I arguing against the method of God's liberation,

I just know that we are different. His ways and mind are not ours. There are things God does with great intention that we, as people with limited understanding, will often misunderstand, and because we wrestle differently, we also process differently. God has a heart, I like to believe that when the enormity of sin became out of control, the Father, Son, and Holy Spirit began talking to one another before deciding to send Jesus. Jesus was often documented talking to the Father. Their access to the conversation was necessary. Since we are unable to pull up a chair and literally have face-to-face time with God, I believe after prayer, we need therapy.

Historical Foundations Interaction

Sigmund Freud's work on trauma and its effects has enduring significance because it provides foundational insights into how early life experiences, particularly traumatic ones, shape an individual's psychological development, emotional responses, and behaviors. His concepts, such as the unconscious mind, repression, and the ways unresolved trauma can manifest in various ways, have informed subsequent fields of psychology, including trauma-informed care. Freud emphasized that trauma often operates unconsciously, influencing behavior and emotions in ways that individuals may not fully understand. This insight helps leaders recognize that behaviors they observe might stem from deep-seated, unresolved issues.

At Progressive Baptist Church I have witnessed the mistreatment of members, in many instances leading to the departure of congregants, unnecessary frictions, halted productivity and an overall spirit of discouragement. Unable to determine the reasoning for congregational disinterest in leadership positions as a young Pastor, I engaged a long-

standing member in conversation about the origin, she disclosed that the response of my predecessor's death should have been therapy, it unfortunately was not their course of action. Much, if not all the unspoken tension could be traced back to failed seasons. There were years when people abused power, neglected responsibilities, overstepped protocols and the subsequent hurt was never addressed.

Freud's ideas about defense mechanisms, such as denial, displacement, and projection, show how people cope with trauma. Recognizing these patterns can foster empathy and understanding rather than judgment. Freud also underscored how early life experiences, including trauma, shape personality and coping mechanisms. This perspective encourages leaders to consider the backstory behind people's actions. Bringing unconscious thoughts to awareness through dialogue and reflection could lead to healing—a concept echoed in modern counseling and pastoral care. Therefore, training leaders to comprehend their trauma, equips them to recognize similar symptoms in the people we are called to serve, the recognition of their counterpoint in another is the missing link in the development of healthy relationships at Progressive.

Since church leaders often serve as both spiritual guides and community caregivers, integrating Freud's principles can create a more compassionate, trauma-sensitive environment. By applying Freudian concepts, we can encourage leaders to explore their own unconscious biases, unresolved traumas, and emotional triggers. This self-awareness helps them lead with humility and empathy. Reflective practices, such as journaling, prayer, or counseling, to help leaders process their emotions and avoid projecting their unresolved issues onto others is going to be part of our leadership requirements at Progressive. Encourage members to share personal testimonies in ways

that honor their journeys and invite healing. Freud's emphasis on narrative aligns with the biblical tradition of storytelling for growth and connection.

The most important integration resulting from this project is providing access to counseling resources for individuals dealing with past traumas. Incorporating services that focus on healing and reconciliation, drawing on spiritual practices like prayer, confession, and communal support will bolster a healthier church environment. Freud's insights into leadership development, particularly in a church context, not only promotes healing for individuals but also strengthens the church community, while fostering a supportive, empathetic environment.

Theological Foundations Interaction

We all experience trauma. Whether the trauma is the result of our negligence, someone else, or even a misunderstanding with God. Everything we experience in life shapes us and molds how we perceive the Lord, His leadership, and His Church. Therefore, it is impossible to minister to the traumatized without developing a theology of trauma. Pastorally attuned, the theology of trauma is wary of platitudes and how they may function in situations of trauma. Certain phrases capture whole theological systems: "It is God's will." "God is testing me." "This is my cross to bear." Theologians of trauma probe the theo-logic underlying these platitudes.[15] Psychoanalytical trauma and Trauma theology are essentially the same. Rather than attempting to over-spiritualize the pain we have undergone, we all deserve a safe space to unpack. As devoted followers, especially

[15] Shelly Rambo, "Wounds That Don't Go Away," The Christian Century, https://www.christiancentury.org/article/critical-essay/how-christian-theology-and-practice-are-being-shaped-trauma-studies.

as Church leaders, I believe we rush to the defense of God at the expense of hurting people. We justify God's reasoning and rights to do with His creation as pleases, which comes off as dismissive to wounded members of creation.

Theologians of trauma seek to avoid prescriptions regarding suffering because such prescriptions might lessen or undermine the reality of someone's suffering, push it below the surface, or sacralize suffering as a good. Theologians of trauma do not seek to judge these platitudes as good or bad but rather to interpret the impact they have on those who hold them. The Psychoanalytic and Psychodynamic methodology champions these notions. Understanding our behavior is a precursor to changing our behavioral patterns, and understanding is not accomplished silently. If "All truth is God's truth," then psychological observation of human emotional and mental processes and the interventions developed from this observation can only help us achieve the emotional and relational health we desire and will not contradict God's will for our lives.

Psychology and spirituality are complementary, not antithetical. Psychoanalytic Therapy posits that the patterns that have the greatest impact on our emotions and behavior come from our family of origin. Our childhood experiences contribute to our functionality or lack of as adults. Furthermore, the spiritual component of human experience is recognized as a viable source of inspiration and strength to produce change. Hence, the need for linkage between a Theology of Trauma and Psychoanalytical Psychology in the Church. There has been a growing realization among many secular and spiritual therapists that human spirituality is a source of great strength. Utilizing psychoanalytic therapy can help us gain an understanding of how our experiences shape our theology.

Psychoanalytic/Psychodynamic Treatment in the Church

The question is, what are some ways we can incorporate Psychoanalytical and Psychodynamic practices into Sunday morning messages, Bible Studies, and the culture of our Church? According to Edwards, this new worldview involves the key discovery that, at the deepest level, we do not exist as separate selves but are all part of one holistic reality. In Edwards' view, theology must base itself on the new worldview that psychology is helping to shape.[16] The integration model of Christian counseling combines psychology, theology, and spirituality in a way that is flexible and fluid to the current counseling situation and is thoughtful of the client's needs at that moment.[17] The integrative model was built on the Christian worldview of general revelation (i.e., God's truth revealed throughout creation; Gen. 1-2; Ps. 19:1-6; Rom. 1:20; Col. 1:16-17) and special revelation (i.e., God's truth revealed through scripture and the life of Jesus Christ; 2 Tim. 3:16-17; Heb. 4:15; 2 Ptr. 1:20-21); however, in this model it is recognized that these sources of truth are not always equally influential throughout life.[18]

Normalizing the necessity of treatment is a starting point. Counseling is already a pastoral element, including Psychoanalytical and/or Psychodynamic language, approaches and ideas that are filtered through Christian lenses should be a "easy" lateral move. On a Sunday-to-Sunday basis, illustrations about the benefit of mental wellness,

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[16] Robert Innes, "How Should We Relate Theology and Psychology?," *Contact* 124, no. 1 (1997): 3-9, DOI: 10.1080/13520806.1997.11758817.

[17] Sheri Cobarruvias, "Faith Integration Model," Sheri Cobarruvias, LPC, https://www.shericobarruviaslpc.com/2018/05/17/faith-integration-model/.

[18] C. R Rogers, "The Necessary and Sufficient Conditions of Therapeutic Personality Change," *Journal of Consulting Psychology* 21, no. 2 (2012): 95-103, http://dx.doi.org.ezproxy.liberty.edu/10.1037/h0045357.

success stories from talk therapy and various treatment victories could help lessen the apprehension of the congregation. I personally know of at least ten members of our Church who are routinely visiting a therapist. Including their testimonies in Sunday morning worship or Wednesday evening Bible Study is also an angle to consider. A couple of years ago, right after Covid, I realized how drained I was. I started taking "mental wellness breaks" and encouraging our congregation to seek outlets, professional help, and medicine if the diagnosis required it. The results allowed me to press forward through the quarter and withhold typing the resignation letter I believed to be the only way to accomplish relief. Whereas the Bible gives some very specific instructions on how one might become more emotionally and spiritually healthy, psychology gives us insight into the emotional and mental dynamic of our experience and provides us with tools to enact the Bible's instructions.[19]

I previously argued for the development of a theology of trauma, which is critical, as is employing an effective interdisciplinary model. For our church, I believe the Psychoanalytical and/or Psychodynamic perspectives offer the most for us. There has never been a person who has visited or will visit our church that has avoided going through "storms." Whether we are aware of it or not we all have dealt with or are living with trauma. Whether it is as simple as our fearfulness of canines because a dog chased us or as complex as being sexually assaulted by a loved one, we all have things we wrestle with. To meet the present needs of the people we lead we must be equipped with psychological tools and must demonstrate a willingness to dive deeply into the discipline

[19] Jared Ammann, "Integration of Christianity and Psychology," Center For Enriching Relationships, https://www.enrichingrelationships.org/blog/2016/2/7/integration-of-christianity-and-psychology.

and develop a more meaningful awareness of what is present in our respective Church homes.

Psychoanalytic and Psychodynamic therapy can be an effective assist in managing our mental health. It is more normal today than years prior to participating in psychotherapy — also called "talk therapy" — especially when we are dealing with new or unexpected challenges in our lives and traumatic or long-standing issues. Our Church is trying to press forward and the want for progression is being overwhelmed by the tendency to be complacent and argumentative. For years, I have strategized through series, sought mediation and outside pastoral help, but never pressed for collective talk therapy, which can be an essential part of our treatment for mental health conditions. Different types of therapy offer different approaches to understanding human behavior, thought, and emotion, depending on your original intent. We each likely have our own unique needs and goals for therapy, which we need to discuss.

From what I have seen, it is not so much the act of asking that paralyzes us—it is what lies beneath: the fear of being vulnerable, rejection, and looking needy or weak. The fear of being seen as a burdensome member of the community instead of a productive one. It points, fundamentally, to our separation from one another.[20] If we want to improve our potential possibilities, heal from our hurt, and proceed toward progress and God's promise, it begins with God. It continues with a conversation about yesterday, and today.

[20] Amanda Palmer and Brené Brown, *The Art of Asking, Or, How I Learned to Stop Worrying and Let People Help* (New York, NY: Grand Central Publishing, 2015), 38.

CHAPTER SIX

PROJECT ANALYSIS

Introduction

This project is very close to my heart. Rev. Dr. Al Kennon, III lovingly encouraged me to transform this project from a transitional leadership manual into a training tool for leadership development, and his advice rejuvenated it. My deep passion for church succession leadership planning had clouded my judgment. After reading and rereading my spiritual autobiography, conducting a contextual analysis, and exploring synergy, I find it baffling that the obvious necessity for this project was overlooked. God entrusted Progressive Baptist Church to me and me to their church. Reflecting on my candidacy sermon from January 13, 2019, titled “God Cares about the Brokenhearted,” I realize this project was always present, hidden in plain sight. Loss, death, fear, and failure, intertwined with Divine providence, brought our paths together. On July 26, 2016, the beloved Pastor of Progressive Baptist Church passed away at the age of fifty-two after over two decades of dedicated Kingdom service.

A year later, during a trip home to Miami, Florida, for different reasons, it happened to be Pastor Kenneth A. Duke's pastoral anniversary celebration. Tired from the night before, I considered staying home. However, God refused to allow such a response. Pastor Jeffrey A. Johnson, Sr., the esteemed pastor of Eastern Star Church in Indianapolis, Indiana, preached my pastor’s anniversary every year, but this year was

different. While standing in the fellowship hall, I met Pastor Johnson for the first time; the two talked amongst themselves, and I could not hear the whole conversation; the piece I managed to hear was, “Tell me about him…”

From that conversation, I learned about a recently vacant church where I could potentially be a good fit. The application process left much to be desired. My first application was considered, but the church decided they were unprepared to move forward—a rather ironic and telling detail now—so they scrapped the process. It resumed later, and I was encouraged to apply again. According to my calendar, I was expecting a favorable response in December 2018, a full year after hearing about the vacancy.

I received the call to pastor Progressive Baptist Church on February 24, 2019, exactly one month before my thirtieth birthday and less than twenty-four hours after burying my grandmother. Again, ironic. Tearfully excited, I accepted the call to pastor Progressive without knowing what was ahead. In our first year together, we completed ninety-five of the one hundred items on the checklist hanging in my office. Sunday attendance doubled, Bible Study attendance more than tripled, we launched a new website after designing a new logo, and the ball was rolling. Year two was the dreaded COVID-19 year—enough said. It was year three that marked the beginning of a shift. The echoes of the search committee’s voices still ring in my head: “Our church NEVER argues.” They must have been advanced learners. For the next two years, it felt like all we did was argue.

During these two years, it was uncovered that many leaders had no training and were woefully unqualified for their roles. Many begrudgingly held the positions as a “favor” to the church; others felt indebted to the former pastor, while the remaining group

unintentionally received titles because they performed the duties. Accessibility had been extended without accountability; it was madness. As if this volatile mixture were insufficient, every leader I inherited was long-standing and traumatized, and many had self-appointed themselves during the vacancy period. The following two years were nearly unbearable. Nearing the end of my rope, I had breakfast with Dr. Frank A. Thomas. Sensitive to my despair, he devoted time to walking alongside me. He told me, "If you hope to turn things around, you must train your leaders, retrain them, and when you are done, train them again!"

The research hypothesis is, if leaders of Progressive Baptist Church participate in a series about understanding what trauma is, then they will be equipped to assess how such trauma has impacted their demonstrated leadership. The six sessions taught will focus on leadership development, specifically highlighting trauma-impacted leaders' ability to proceed forward with post-traumatic experiences.

Expected Project Results

The anticipated outcome of this project is that leaders will become aware of their personal traumas and the sensitivities that have affected or hindered their current leadership. This realization would transform how leaders arrive at church, serve others, and perceive themselves and God. Furthermore, by understanding personal traumas, I believe participants will find it influences how they interpret scripture and provide comfort to those grappling with trauma. Progressive Baptist Church will undergo a cultural shift from unaddressed pain to a readiness to engage in conversations that could unite our congregation. Since we all have, or likely will, encountered a traumatic event in

our lives, preparing to minister to those affected by trauma is a proactive strategy to equip leaders for the challenges ahead.

Methodology

The goal of this project is to demonstrate that if the leadership of the Progressive Baptist Church engages in Bible Study lessons focused on trauma and its effects on their leadership, transformed leaders will emerge. The leaders of the Progressive Baptist Church are currently operating below their leadership potential. This project aims to enhance the capacity and willingness of servant-leaders to be effective in their current roles while pursuing personal healing. It was crucial to target leaders to participate in this project specifically. Historically, our church has allowed leadership vacancies to become common, and neglected responsibilities have consistently existed within this context; however, progress has been made since we amended our bylaws. We strive to adopt a biblical model for leading the Progressive Baptist Church and its ministries. The impetus for this project is to cultivate effective leaders through teaching, training, and open discourse with the church's servant leaders.

The methodology of this research begins with understanding the need for qualitative data at the Progressive Baptist Church. If our current leaders are going to be gathered, recognizing the importance of serving well in the church is essential. Evaluating everyone’s ability to be introspective, collaborative, and consistent significantly influences the selection of candidates. Over the years, I have built relationships and become familiar with people’s patterns, work schedules, and family dynamics. Scheduling will be crucial in preventing participants from starting and

dropping out. To ensure effectiveness, the collected data will be numerical. It is also discernible without revealing identifying details, allowing information to be explained and shared among the leaders and emerging leaders at the Progressive Baptist Church to assess their responsibilities as effective leaders long after this project is completed.

Implementation

My six-week project implementation intended to engage in contemplative conversation about trauma. This chapter highlights the lessons learned and the data collected, which will lead to my conclusion. Deuteronomy 34 and Joshua 1:1-4 provided my foundation. In every session, we referenced Moses' leadership, the relationship between Joshua and Moses, and ultimately, Joshua's responsibility following the passing of Israel's long-standing leader. The aforementioned passages and a few supplemental texts helped ground us biblically as we wove psychological principles into our theological tapestry. Educating our leaders about trauma, its effects on their leadership, and our congregational wellness was not a simple task; thankfully, it yielded positive outcomes for the participants and me as Senior Pastor. The genuine discussions we held were unlike those in our previous meetings. During our time together, previously undisclosed information was shared, and the openness of our gathering was transformative.

Lesson One – The Leadership Basics

Rather than diving headfirst into the depths of traumatic moments from their childhood, a mentor suggested that connecting with the people would be beneficial for

establishing expectations. After clearly explaining my project in detail, reviewing consent forms, and gathering signed documents, I addressed a few questions before beginning. Wanting to be intentional about our time together, we started with the key milestones of my spiritual autobiography. The process I underwent at United Theological Seminary was valuable, and bypassing the steps to reach semester five resulted in less desirable participant outcomes. Who would have guessed that my Spiritual Autobiography would be what humanized me to the people I have pastored for nearly six years. One participant said, “I never heard you tell any of those stories before, and I never knew you experienced such devastating losses. This gathering has allowed me to get to know you better!”

Hearing my story broke the ice and planted a seed in participants' minds to share freely. It made the Synergy easy to discern when conversing about my life and reminding them of our contextual setting, specifically the passing of my predecessor and the earlier years of my pastoral ministry after the transition. Before I could get the words out, someone in the back of the room exclaimed, “I already see where this is going.” Rallying back from the loss of my father nearly twenty-five years ago and the loss of their former (for some their forever) pastor were an obvious linkage that bound us. Trauma has a funny way of bringing us together.

Knowing his leadership was now sacred and without error, my approach was to define everything we discussed. Of course, using the Bible as our primary text and then consulting outside material is to be considered. My experiences with Progressive informed how I navigated sensitive material. Venturing into spaces that appeared irrelevant lured the people into listening, and our conversation would draw parallels.

Rather than talking directly about our church, I considered this approach to assessing leadership.[1] Today, most economic organizations behave like participants in a finite game. They breathlessly chase the next quarterly profit, market share increase, and immediate gratification of short-term goals. In doing so, they strongly focus on satisfying market needs. This dynamic often resembles a sporting competition, where it's about winning or losing. In times of crisis, these organizations react immediately and absolutely. If the quarterly goal fails, heads roll—regardless of whether the strategic direction is correct. In a fast-paced and complex market environment, short-term and absolute goals for ensuring measurability are increasingly narrow. We have been guilty of narrowmindedness at Progressive. Losing Pastor Jones led to a crisis-minded group of leaders constantly pushing for the achievement of budgets and goals at the expense of hurting people. Pressing forward without considering the feelings of others is a toxic cultural trait that needs to be addressed without coming across as accusatory. Reflecting on this explanation helps us hold a mirror to our priorities as leaders and creates space to reshape our organizational approach. Redefining leadership was a two-step process. The first step was developing a precise working definition, followed by a biblical partnership that provided a healthy model to emulate.

Warren G. Bennis, conveyed through John Sculley, the former CEO of Apple, provided the precise definition. In some candid conversations during meals (we fed participants because many left directly from work), one reoccurring thought was a diminished sense of enthusiasm. Whether it was directly related to the heaviness attributed to pastoral loss or genuine frustration resulting from attempting to lead other

[1] Anders Indset, "The Infinite Organization," The Viking Code by Anders Indset, https://ssir.org/books/excerpts/entry/the-viking-code-anders-indset#.

wounded people, fatigue, disconnectedness, and apathy were communal sentiments.[2] In a world increasingly marked by uncertainty, global challenges such as climate change and the rapid rise of artificial general intelligence, many people find themselves grappling with a loss—the vitality and profound experience of truly being alive. Traditional notions of success and progress feel elusive amid the relentless pace of modern life.[3]

Throughout lesson one, we discussed what leadership "looks like" and what kind of leaders we aspire to be. We lovingly acknowledged the former leader of Progressive Baptist Church, and we were able to honestly identify some leadership challenges and "deficiencies." Hoping to center us on a few ideas, I used the following questions to build our conversations around:

1. How does your spiritual autobiography shape how you lead?
2. What is something traumatic from your life that you see in the life of Progressive?
3. Should psychological treatment be part of Progressive's culture?

I was pleasantly surprised while reading journal entries. Participant Alpha had this to say about their Spiritual Autobiography:

> It helps me to be more understanding of where people may be in their journey. It helps me to realize that not everyone is at the same level in their walk, not everyone has the same understanding of the bible. But we are all God's children, and it is our responsibility to love and lead his people. Mainly I think it helps to be overall more loving towards everybody we encounter, you never know how the smallest gesture may go a long way. Sometimes just smiling at someone or giving them a compliment could turn a bad day around for a person. I am constantly reminded to be mindful of how you treat people, even strangers that you may never see again.

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[2] Warren G. Bennis, *On Becoming a Leader* (New York, NY: Basic Books, 1989), 140.

[3] Anders Indset, "Chapter Eight," in *The Viking Code: The Art and Science of Norwegian Success* (Hoboken, NJ: John Wiley and Sons, 2024), 125–125.

Knowing how divisive things were in our church no more than two years ago, hearing people consider others felt like a move in the right direction. So many things from the past were buried. I urged each participant to think through the chapters of their respective spiritual autobiographies while processing why certain behaviors exhibited currently exist and keeping others' diverse experiences in mind. This simple exercise proved helpful in "seeing our neighbors." I wanted to highlight the vulnerability of participant Delta in their response to question two.

> I see Progressive being cautious. I became very cautious after being hurt by people I thought were friends. I see this same cautious nature in Progressive because of the church's past hurt. As I have seen in my own life, the more control I feel I have the safer I feel especially in personal relationships. This is what I see with the Progressive. I see some members who are protecting themselves from being hurt by taking more control. The more control they feel they have over church operations, the more they can protect themselves from being hurt again. I imagine this to include the hurt of seeing people leave at a time the church needed them. This has been hard for some of us that continued to remain at progressive after Pastor Jones died.

While preparing for project implementation, I focused on proving my hypothesis. Clinging to the belief that a successful defense depended on a validated hypothesis caused me sleepless nights. However, as soon as I read the journal entries from our first evening together, relief washed over me, and for the first time in a long while, I felt at peace. I had forgotten that these were the people I had pastored. This oversight nearly undermined my opportunity to grow alongside them and enjoy the togetherness of the journey. Their responses allowed me to see them, some for the first time truly, and I could not be prouder.

Lesson Two – Death, Decline and Discomfort

> Then Moses went up from the plains of Moab to Mount Nebo, to the top of Pisgah, which is opposite Jericho, and the Lord showed him the whole land: Gilead as far as Dan, all Naphtali, the land of Ephraim and Manasseh, all the land of Judah as far as the Western Sea, the Negeb, and the Plain—that is, the valley of Jericho, the city of palm trees—as far as Zoar. The Lord said to him, "This is the land of which I swore to Abraham, to Isaac, and to Jacob, saying, 'I will give it to your descendants.' I have let you see it with your eyes, but you shall not cross over there." Then Moses, the servant of the Lord, died there in the land of Moab, at the Lord's command. He buried him in a valley in the land of Moab, opposite Beth-peor, but no one knows his burial place to this day. Moses was one hundred twenty years old when he died; his sight was unimpaired, and his vigor had not abated. The Israelites wept for Moses in the plains of Moab thirty days; then the period of mourning for Moses was ended. Joshua son of Nun was full of the spirit of wisdom because Moses had laid his hands on him, and the Israelites obeyed him, doing as the Lord had commanded Moses. Never since has there arisen a prophet in Israel like Moses, whom the Lord knew face to face. He was unequaled for all the signs and wonders that the Lord sent him to perform in the land of Egypt, against Pharaoh and all his servants and his entire land, and for all the mighty deeds and all the terrifying displays of power that Moses performed in the sight of all Israel (Deu. 34:1–12).

Old Testament leadership tended to last significantly longer than those figures of faith in the New Testament period, yet all had an expiration date. The Bible is filled with examples of leadership, none of which speak more poignantly to the context of Progressive Baptist Church than Moses. Every Moses needs a Joshua, and the death of Pastor Jones, along with Progressive's decline and the period of discomfort that followed, illustrates this need. Participant Zeta expressed:

> Pastor Jones was the only preacher I knew since I began regularly attending church when I was in middle school. He baptized me, he presided over my brother's wedding, he was like family. I will never forget my brother calling me at work, at the time I worked in a call center and my brother asked me to step outside. I thought he was calling to complain about his wife again, but when I heard those words "Pastor Jones died", I was in shock. We had just seen him a few days earlier, he had just preached an amazing sermon. The Sunday after his last sermon, he walked up to my son and knelt to talk to him. He told my son about the lesson his father taught him about the four things all men should have. He told my son that a man should always have a belt so that he could keep his pants up, a man should always have a watch so that he knows what time it is. A man should

> always have a wallet, so that he can keep track of his money, and lastly a man should always have a pen in case he needs to write something down. A church member just so happened to see this conversation occurring and snapped a picture, not knowing that would be one of the last pictures ever taken of him. It was a very difficult time for our church, and I think that is why some people have forgotten about what it was like in that six-month period leading up to his death. People forget that Pastor Jones was not cashing his paychecks from the church because we didn't have enough money. When he passed away, he had several uncashed checks from the church, the church was not in a good financial place and was in jeopardy of closing. So, anybody who wants to say that it was better before either has no idea what it was like before, or they just suffer from revisionist history.

There was no succession plan in place for my predecessor, and while they were enduring a tough season, nobody considered alternative planning. This, among other factors, led to a decline after his passing and a prolonged period of discomfort. In our week two session, we discussed death, mentorship, and the psychology of leadership. Pastor Jones valiantly served the people of Progressive Baptist Church for over two decades. When he passed suddenly from an unforeseen heart attack, the church was devastated. No interim pastor was selected; instead, the church allowed a collection of supply preachers to fill the vacancy for over a year. This interim period preceding the appointment of an interim pastor was challenging for the current leaders. During our time together, we discussed the mass exodus of members. Many leaders stopped coming, while others joined different churches. Some believed it was the pain of returning to a church that no longer had the leader they had come to love, while others argued that dysfunction arose during this hollow period. In acknowledging the significance of Moses' mentorship of Joshua, Participant Epsilon said:

> I do see value, in fact it feels very similar to the relationship that I have been able to build with Pastor Bouie. Over the years that he has been here, he and I have grown closer and our brotherhood has grown stronger. We have done everything from a 12-hour road trips to marching in downtown Indianapolis protesting against police brutality. I have seen Pastor Bouie wear so many hats other than

> Pastor. I feel that I have received blessings just from being close to him and being in his circle, I have been able to meet really cool people and do really cool things because of my relationship with him. I have found my spiritual walk grow stronger from being around him and listening to him speak. I have seen the Lord work through him, and I am truly blessed to have a front row seat. I know that I can call him day or night and he will always be there with a listening ear and spiritual guidance. What I love most is that his words are honest and sincere, and not always what you want to hear. But it will always be based on the word of God and not just his opinion. Since I am able to draw parallels to my own relationship and I know how valuable it has been for me, I can absolutely see value in it for others.

One of the greatest fears of Progressive is being left without help. For those who experienced life without pastoral leadership, which nearly all participants had, returning to an absent leadership seat terrified them. When my father passed away, I recall feeling like our members. Wondering if God cares about you is an unsettling place to live. Constantly hurting beneath the surface, watching people that were formerly close become more distant, and the decline of a once thriving institution is traumatic.

Progressive once occupied a smaller sanctuary off Michigan Road, which is now home to a Seventh-day Adventist church; in those days, the ministry was teaming with life. While reminiscing about Progressive's "glory days," one participant bragged, "church would be so packed that we had to add chairs at the ends of the aisles even though we had two services!" Much like the children of Israel after being extricated from Egyptian captivity, there were many to return to the days of old.[4] Deuteronomy—and the era of Israel's foundations all end with Moses's death. He has led them out of Egyptian slavery and has guided them through the wilderness and the various difficulties and vicissitudes of their life together in those difficult circumstances. He has taught them all the instructions or laws that the Lord gives them as the means of life. He had interceded

[4] Patrick D. Miller, "Deuteronomy," *Interpretation, a Bible Commentary for Teaching and Preaching* (Louisville, KY: John Knox Press, 1990).

for them when they did not keep the commandments; he had reprimanded them when they complained to him and the Lord about their condition. He is truly the servant of the Lord, as he is designated here (34:5). There is nothing more to do except lead the people into the land. But that is the one thing not given to Moses to do.

Though I never had the fortune of meeting my predecessor, I genuinely believe he led the people he served with love. Moving from our former home on Michigan Road to 4625 W. 59th Street was seen as a divine calling. Drafts of the new building were created, but he passed away before it was constructed. I do not see myself as Progressive's Joshua; my focus with our leaders is to ensure we are ready for succession. Mortality is something we all need to reconcile; aside from morbidity, planning for the inevitable should be a priority for every leader. Recognizing that we will not be permanent fixtures in leadership informs the often-overlooked duty of every leader: preparing the next leader to succeed. Discomfort following death is the most common human reaction. However, the unease tied to a prolonged vacancy can be avoided.[5] Great leaders possess self-awareness, emotional intelligence, adaptability, vision, and resilience. They understand the psychology of influence and persuasion, empower and delegate effectively, manage conflicts and negotiations, prioritize their team's well-being, and continuously learn and adapt. Authenticity is a crucial trait that builds trust and respect. By grasping the psychological facets of leadership, individuals can cultivate the skills necessary to become effective leaders.

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[5] Amlesh Ranjan, "The Psychology of Leadership: Understanding the Minds of Great Leaders," The Economic Times, https://economictimes.indiatimes.com/jobs/c-suite/the-psychology-of-leadership-understanding-the-minds-of-great-leaders/articleshow/104627462.cms?from=mdr#.

Lesson Three – Trauma Theology

In the wake of these experiences, trauma is often associated with a shattering or rupture felt within the individual. The trauma experience disrupts one's sense of identity and coherence in life; it can fracture cognition and language to the point that a trauma survivor struggles to articulate and comprehend their experiences. Additionally, the traumatic event can distort perceptions of time, causing events related to the trauma to intrude into the present through hallucinations, nightmares, and flashbacks. Trauma theology typically does not focus on developing theodicies – theological explanations for why evil or trauma befalls individuals. Trauma theologians generally do not devote much effort to explaining the reasons behind trauma experiences. This approach stems mainly from the recognition that, as a theology prioritizing bodily experiences, trauma theology acknowledges that theological explanations offer little solace to trauma survivors.

The journaling from this session stood out. When asked to define trauma theology, Participant Theta responded:

> I believe trauma theology attempts to re-define trauma in terms that has at its core the power of God to remake an individual or community after intense suffering. I know we talked about not using scripture or theological terms to address an individual's traumatic experience. However, I believe the power of God can aid in overcoming anything. Many concepts in scripture can still be used to address the issue(s) that caused the trauma without reciting chapter or verse. I don't believe we can define any "theology" without using some semblance of the nature of God or religious belief. I do understand how using terms or church-y sayings like I'll pray for you or just trust God doesn't help the trauma survivor to acknowledge they have experienced something that has power over them and has disrupted their life.

Initially, I felt most nervous about this section because we would have to navigate sensitive territory. Throughout my years as a pastor, some of the "secrets" in the room were already familiar stories. The goal was to tread lightly to avoid accusations of leading

the witness. Trauma identification was one aspect, but suffering was another. We defined suffering as a deeply unpleasant or distressing experience that significantly impacts a person on psychological, physical, and existential levels, often marked by negative emotions, a sense of threat to one's well-being, and a desire for the unpleasantness to end, stemming from events that challenge their values or sense of self. It can manifest in various forms, including physical pain, loss, trauma, or social isolation. We concluded that trauma refers to a specific, often overwhelming event or series of events perceived as life-threatening or highly harmful, causing lasting adverse effects on a person's mental and emotional state. In contrast, suffering is a broader term encompassing any form of psychological distress or discomfort, which can arise from trauma but also from other sources like illness, loss, or challenging life circumstances. Essentially, trauma is a more distinct and impactful type of suffering directly linked to a specific traumatic event.

After hearing the lesson for the evening, the response I was most curious to read was regarding people’s personal theology surrounding trauma and how it was developed. I never expected to read what followed from Participant Eta:

> I'm unsure of what's being asked here. However, an incidence comes to mind when I was a young boy. There was a group of 4 of us that played basketball and baseball throughout the school year as well as during summer break… Since we went to a predominately white middle and high school, I guess it was inevitable that 2 of the 4 of us would fall in love with a white girl. However, one of the fellows who fell in love with a white girl had problems with her father... a white cop. To make a long story short, we found our friend dead in the trunk of his car. To this day, no one knows who killed him...we had a good idea, but this was traumatizing to us as 13- and 14-year-old boys. This guy was one of the guys that I could talk to about anything, and we would laugh and joke until we had tears in our eyes. There was not any counseling offered, and school continued as usual. I couldn't discuss my pain with anyone at school or home. My dad drank all the time, and my mom kept herself busy by playing bridge with her club members 2 or 3 days per week. Since there was no one else to talk to, I eventually developed a relationship with God and knew He heard me and cared about my pain. This is why I don't believe we can have a trauma theology, which includes pastoral care

> among other disciplines and not draw from the power of God to help uncover hidden anger and rage and fear and shame that people cover up by putting on a mask as if everything is just fine. Too often, we're told as boys to get over it or "Man Up" and the underlying causes of the past, if not unearthed and dealt with, will lead to destructive behavior in the future. I was on the path of self-destruction, and it was the Spirit of God that led me through introspection to reflection and to healing.

This group's diversity of ages, upbringings, and experiences created the ideal mix for journal entries and in-person conversations. Hearing the contents of their hearts and reading their innermost thoughts further shaped my understanding of trauma, its impact, and how individuals on the receiving end interpret who God is. This session prompted me to reflect more deeply on sermon preparation. Realizing that I have likely been guilty of an insensitive textual reading, interpretation, and sermon delivery was unsettling. During this session, I remembered a sermon I recently preached at the Christian Theological Seminary's Mixed Methods Conference. Dr. Tisha Dixon Williams welcomed us into closeness with a sermon from Job 2:3-9.

> The Lord said to the accuser,[e] "Have you considered my servant Job? There is no one like him on the earth, a blameless and upright man who fears God and turns away from evil. He still persists in his integrity, although you incited me against him, to destroy him for no reason." Then the accuser[f] answered the Lord, "Skin for skin! All that the man has he will give for his life. But stretch out your hand now and touch his bone and his flesh, and he will curse you to your face." The Lord said to the accuser,[g] "Very well, he is in your power; only spare his life." So the accuser[h] went out from the presence of the Lord and inflicted loathsome sores on Job from the sole of his foot to the crown of his head. Job[i] took a potsherd with which to scrape himself and sat among the ashes. Then his wife said to him, "Do you still persist in your integrity? Curse[j] God and die." But he said to her, "You speak as any foolish woman would speak. Shall we receive good from God and not receive evil?" In all this Job did not sin with his lips.

Dr. Dixon Williams argued that we have villainized Job's wife based on just one scripture verse, neglecting her experiences. His wife, whose name we do not know, lost everything Job lost, along with the added trauma of having carried and borne the children who died.

We hastily depict Job as the victim and her as the villain, overlooking her trauma. The silence in the room was deafening. Everyone knew Job's story; all of us were familiar with Job's wife, and except for two participants who heard the sermon, none had considered this perspective. I asked the rhetorical question, "I wonder how many people in our congregation feel like Job's wife?" As leaders, we must cultivate sensitivity to those we lead as a necessary skill. Our awareness must be heightened, and our antennae raised because relying on superficial engagement can mislead us and cause us to miss ministry opportunities.

This session was also sensitive as it reminded one participant of the recent suicide of our Minister of Music. At first, the remarks preceding the inquiry were somewhat muffled behind the mask, but we all heard the question clearly: "I wonder how many times we missed opportunities to serve him?" His loss is something we are still recovering from nearly six months later. The raised question made us all reflect on ourselves. Nobody questioned God or His will; instead, we pondered our personal ability to lead well and attend to the needs of the people entrusted to us by Almighty God. Thankfully, the question was viewed not as a personal failure of any individual or the group but as an opportunity for introspection and improvement. Every church has traumatized members.

At Progressive, the aim is not to rush to suggest a diagnosis, prescribe medication, or try to resolve whatever tension lies beneath. The hope is to be sensitive, attentive, compassionate, and present. I believe that creating a culture where advocating for therapy is a normative response will aid our efforts in addressing the needs of the whole individual. Years ago, before starting my doctoral journey, the Lord placed a series on my

heart entitled *Mental Health and The Black Church*. During one of the Bible study sessions, Dr. Morgan Thomas shared, "Many people believe the church is ineffective because they are seeking spiritual band-aids for mental health wounds." Her words resonate more today than when they were first spoken. By training leaders to develop a heightened awareness of suppressed emotional baggage, we equip them to be more effective in their leadership, as it enables them to see themselves and others more clearly.

Lesson Four – Psychoanalytic and Psychodynamic Theory/Therapy

Psychoanalytic theory serves as the foundation for psychoanalysis, a clinical method aimed at treating mental health issues. The goal of psychoanalysis is to assist patients in accessing their repressed feelings and experiences through therapy, which can facilitate cathartic healing. The most addressed issues in psychoanalysis include phobias, compulsions, obsessions, anxiety attacks, depression, sexual dysfunctions, relationship difficulties, and character challenges. Psychoanalytic theory has profoundly influenced psychology, resulting in the development of various therapeutic approaches. Nonetheless, it has also faced criticism and has evolved.

Psychodynamic theory and practice are based on Freud's psychoanalysis but incorporate the contributions of other neo-Freudians. Psychodynamic therapy centers on the psychological forces that influence human behavior and personality and the interplay between these forces and the social environment. Sessions of psychodynamic therapy are generally less intense and less frequent than those of psychoanalysis, with the patient typically seated face-to-face with the therapist. Both psychoanalysis and psychodynamic

therapy seek to help individuals understand their emotions and unconscious behaviors and how these can impact their relationships.

Admittedly, being a psychological expert is not a title attached to my name; however, I feel confident that everyone can benefit from therapy! The heavy content from the previous lesson caused me to pivot during this budgeted time together. Hyperfocus on our pasts and leadership perspectives and reflecting on the passing of prominent leaders prompted me to focus more on Freud this time; Freud's life and work in the field (not all his work) made for lighthearted discourse and an unnoticed segue into the necessity of therapy. Without being prompted, one participant had a revelatory moment aloud, "Pastor Jones died, and we never talked about it. One Sunday, he was here, then he was gone, and nobody came to help." Several long-standing members were project participants, and I watched their faces closely as they recollected memories from almost a decade old. This moment led to a collective sigh. Should therapy become part of our church? Participant Iota responded to this question while journaling about the session:

> I think therapy be required because it would force people to think deeper and in ways they may have never considered. When we get to those levels, we can have much deeper and meaningful conversations that lead to much more positive outcomes. I think similar to how this project has forced us to view situations and people from a different lens, it could help the church in that same fashion. I often find myself wondering, why does that person react in that fashion? Or why did that small thing get that person so worked up? We have no idea what sort of trauma could have been triggered by just the smallest thing, so we should always be mindful that people bring all sorts of challenges and traumas to their everyday lives. We have no idea what they have been through, so we should be more compassionate and not so judgmental when dealing with others whose stories we may not know.

Therapy is important. Whether you believe you need it or not, we learned that there are memories we have unintentionally forgotten or even misremembered. Though my focus was limited to two areas, there are five broad categories of psychotherapy, according to

the Encyclopedia of Psychology. These approaches include psychanalysis and psychodynamics, behavior therapy, and cognitive therapy. Psychoanalysis and psychodynamic therapies focus on changing problematic behaviors, feelings, and thoughts by discovering their unconscious meanings and motivations. Psychoanalytically oriented therapies are characterized by a close working partnership between therapist and patient. Patients learn about themselves by exploring their interactions in the therapeutic relationship.[6] While psychoanalysis is closely identified with Sigmund Freud, it has been extended and modified since his early formulations.

The Behavior Therapy approach focuses on learning's role in developing both normal and abnormal behaviors.

> Ivan Pavlov made important contributions to behavior therapy by discovering classical conditioning, or associative learning. Pavlov's famous dogs, for example, began drooling when they heard their dinner bell, because they associated the sound with food. "Desensitizing" is classical conditioning in action: A therapist might help a client with a phobia through repeated exposure to whatever it is that causes anxiety. Another important thinker was E.L. Thorndike, who discovered operant conditioning. This type of learning relies on rewards and punishments to shape people's behavior. Several variations have developed since behavior therapy's emergence in the 1950s. One variation is cognitive-behavioral therapy, which focuses on both thoughts and behaviors.[7]

Cognitive therapy emphasizes what people think rather than what they do. Cognitive therapists believe that dysfunctional thinking leads to dysfunctional emotions or behaviors. People can change how they feel and what they do by changing their thoughts. Major figures in cognitive therapy include Albert Ellis and Aaron Beck, humanistic therapy. This approach emphasizes people's capacity to make rational choices and

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[6] American Psychological Association, *Encyclopedia of Psychology*, s.v. “Psychotherapy,” https://www.apa.org/topics/psychotherapy.

[7] American Psychological Association, “Understanding Psychotherapy and How It Works,” APA, https://www.apa.org/topics/psychotherapy/approaches.

develop to their maximum potential. Concern and respect for others are also important themes.

Humanistic philosophers like Jean-Paul Sartre, Martin Buber, and Søren Kierkegaard influenced this type of therapy. Three types of humanistic therapy are especially influential. Client-centered therapy rejects the idea of therapists as authorities on their clients' inner experiences. Instead, therapists help clients change by emphasizing their concerns, care, and interests. Gestalt therapy emphasizes "organismic holism," the importance of being aware of the here and now and accepting responsibility for yourself. Existential therapy focuses on free will, self-determination, and the search for meaning—integrative or holistic therapy. Many therapists don't tie themselves to any one approach. Instead, they blend elements from different approaches and tailor their treatment according to each client's needs.[8]

Lesson Four – Coping with Trauma

Participant Delta opened our session with this reflection:

> The passing of Pastor Jones had a profound and unique impact on me. While he wasn't my father or an uncle, I loved him as though he were. Pastor Jones had known me since infancy and continued to guide me into adulthood. I was 21 years old when he passed, and in those years, I always felt that he truly loved me. His care for me went beyond that of a pastor to a parishioner; it felt personal, genuine, and deep. I never once felt like I was just another "job" to him. I truly believe he cared about my well-being, and for that, I'm incredibly grateful. In the years since his passing, I've been blessed to have Pastor Bouie step into that space left in my heart. Pastor Bouie has made me feel seen, valued, and loved, just as Pastor Jones did. The love I have for Pastor Bouie and his family is something that runs deep. I'm confident that Pastor Jones would have embraced the Bouie family with the same warmth and love, welcoming them with open arms as he always did for those who were dear to him.

[8] American Psychological Association, "Understanding Psychotherapy and How It Works," APA, https://www.apa.org/topics/psychotherapy/approaches.

When the leader, Pastor Michael K. Jones, died, regardless of how quickly a change in leadership appeared to fill the "empty space", the people had to learn to deal with the reality of their new life. Before identifying how to cope, Dr. Jonathan Ferguson deemed it prudent to identify different kinds of traumas. Many of our participants were unfamiliar with these terms and how traumas existed without distinctive categories.

> Acute trauma is a psychological trauma that occurs in response to a single, highly stressful event. For example, it can come after experiencing a natural disaster, seeing a bad car accident, or witnessing violence. Acute trauma can lead to long-term mental health problems if not appropriately addressed. This type of trauma can lead to acute stress disorder (ASD), which is a mental health condition typically appearing within 3 days of a traumatizing event and lasting up to 1 month.[9]

Chronic trauma is a response to ongoing or repeated traumatic experiences. It differs from acute trauma in this sense, as acute trauma occurs after just one traumatic experience or event. Chronic trauma can result from physical abuse, sexual abuse, emotional abuse, domestic abuse, and poverty.

Physical abusers often use force to control their victims. They may hit, kick, choke, or throw things at them — the list goes on. It is common for physical abusers to threaten their victims and use fear and intimidation to control them. Sexual abusers often take advantage of people who are weaker than they are. They may be in a position of power over their victim, making it easier for them to coerce or force them into sexual acts. Victims of sexual abuse often suffer from flashbacks, nightmares, anxiety disorders, depression, and post-traumatic stress disorder (PTSD), sometimes even long after the initial event occurred. Emotional abusers try to chip away at self-esteem by putting their victims down constantly or making them feel bad about themselves. Domestic violence

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[9] Ashley Ertel, "The Different Types of Trauma Explained," Talkspace, https://www.talkspace.com/blog/types-of-trauma/.

can cause chronic trauma. It is not always physical abuse either — mental and emotional torture can be just as debilitating. Domestic violence targets every aspect of a person's life to control them. It leaves long-term scars that can be difficult to deal with for years after the abuse has stopped. Growing up in poverty can result in chronic trauma. Children who grow up below the poverty line are more likely to see violence, witness drug use, and not have enough food or adequate shelter. This can lead to lasting effects such as anxiety, depression, PTSD, and more.

Complex trauma is a type of stress like generational trauma that can occur when someone experiences multiple, chronic, or prolonged exposure to traumatizing events. It can happen to both children and adults. However, complex traumas like abandonment trauma, for example, are more common among those who experienced abuse or neglect during childhood. Complex trauma can cause long-term problems with physical and mental health. Forming and maintaining healthy relationships can also be very isolating and challenging.

After the dust settled from the establishment of categories, Dr. Ferguson focused on the most pressing question: how do we cope? To avoid the possible embarrassment of unhealthy responses being shared, we began identifying the categories of unhealthy reactions and then established some healthy alternatives.[10] Following a traumatic event, people often feel stunned, disoriented, or unable to process distressing information. Once these initial reactions subside, individuals may experience a variety of thoughts and behaviors.

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[10] American Psychological Association, "PTSD Treatment: Information for Patients and Families," APA, https://www.apa.org/ptsd-guideline/patients-and-families.

Intense or unpredictable feelings may make you may be anxious, nervous, overwhelmed, or grief-stricken. You may also feel more irritable or moody than usual. You might have repeated and vivid memories of the event. These memories may occur for no apparent reason and may lead to physical reactions such as rapid heartbeat or sweating. It may be difficult to concentrate or make decisions. Sleep and eating patterns also can be disrupted—some people may overeat and oversleep, while others experience a loss of sleep and loss of appetite. Sensitivity to environmental factors such as sirens, loud noises, or other environmental sensations may stimulate memories of the disaster create heightened anxiety. These "triggers" may be accompanied by fears that the stressful event will be repeated. Strained interpersonal relationships may increase conflict, such as more frequent disagreements with family members and coworkers, can occur. You might also become withdrawn, isolated, or disengaged from your usual social activities. Stress-related physical symptoms such as headaches, nausea, and chest pain may occur and could require medical attention. Preexisting medical conditions could be affected by disaster-related stress.

The good news is that there are very effective ways to cope with and treat the stressful effects of trauma.[11] Psychologists and other researchers have found that these actions can help - lean on your loved ones. Identify friends or family members for support. If you feel ready to discuss the traumatic event, you might talk to them about your experience and your feelings. You can also ask loved ones to help you with household tasks or other obligations to relieve some of your daily stress. Prioritize self-

[11] W. A. Tol, C. Barbui, M. van Ommeren, "Management of Acute Stress, PTSD, and Bereavement: WHO recommendations," *JAMA: Journal of the American Medical Association* 310, no. 5 (2013): 477–478, https://doi.org/10.1001/jama.2013.166723.

care by doing your best to eat nutritious meals, get regular physical activity, and get a good night's sleep. And seek out other healthy coping strategies such as art, music, meditation, relaxation, and spending time in nature. It is normal to want to avoid thinking about a traumatic event but be patient. But not leaving the house, sleeping excessively, isolating yourself from loved ones, and using substances to escape reminders are not healthy ways to cope over time. Though avoidance is normal, too much of it can prolong your stress and keep you from healing. Gradually, try to ease back into a normal routine. Support from loved ones or a mental health professional can help a lot as you get back in the groove.[12]

Lesson Five – Moving Forward

Placing ourselves in Joshua's shoes was the best approach to moving forward. How would you feel if you were Joshua? Participant Beta replied:

> If I were Joshua in Joshua 1, I would likely feel a mixture of overwhelming responsibility, fear, and hope, combined with a deep sense of both personal and collective pressure. Here's a breakdown of how I might feel in that moment. First a slight fear of replacing a great leader, followed by confidence with assurance of the Lord being with me. Companionship along with the mentoring provides confidence to direct. Seeing the obedience of the Israelites strengthened confidence in leadership. Second, overwhelmed by the Weight of Responsibility Joshua had just been appointed the leader of Israel after the death of Moses, arguably one of the greatest leaders in Israel's history. Moses had been a spiritual giant, and his legacy would have cast a long shadow over Joshua's leadership. How I might feel: I would likely feel the gravity of the situation—having to fill the shoes of someone so revered, especially when the people's expectations were high. The task of leading millions of people into the Promised Land, especially after 40 years of wandering in the wilderness, would be daunting. The responsibility to lead and guide a whole nation, not to mention the physical and emotional challenges of the task, would be incredibly heavy. Finally, encouraged: God's direct reassurance, "Be strong and courageous," would provide a sense of comfort and confidence in the face of uncertainty.

[12] American Psychological Association, "Coping with Traumatic Stress," American Psychological Association, https://www.apa.org/topics/trauma/stress?utm_source.com.

Identifying with how Joshua likely felt permitted participants to voice themselves without fear of judgment because they were responding on Joshua's behalf. This eased the tension of personal leadership insecurities.

Lesson Six – Moving Forward Part Deux

Prior to our final session, I preached a sermon and provided a list of practical applications for members to jot down and keep nearby. This tactic was repeated when Participant Gamma brought in this list for us to consider a keepsake as we decide how to proceed. There are many ways to move forward after trauma, including talking about your feelings, practicing self-care, getting back to your routine, being patient, expressing anger safely, seeking help, being grateful, and leaning on loved ones.

Talking to someone you trust about your experience and feelings can help you be more resilient. You can also try talking to people who have had similar experiences. Eat well, get enough sleep, and exercise regularly. You can also try relaxation techniques like yoga, meditation, or breathing. Try to gradually ease back into your normal routine. It is normal to want to avoid thinking about the trauma but avoiding it can prolong your stress. You can try writing about your feelings, expressing them through art or music, or exercising. If symptoms persist, you can get help from a mental health professional. You can also call the 988 Suicide and Crisis Lifeline for support from a trained counselor. Trauma can make people more grateful for what they have. Ask friends and family for support and ask them to help with household tasks. Find a support group: You can find a local support group or one online.[13]

[13] American Psychological Association, "How to Cope with Traumatic Stress," American Psychological Association, https://www.apa.org/topics/trauma/stress.

Summary of Learning

Every participant in this project holds some leadership role. Whether it is in the Diaconate, Youth, Young Adults, Outreach, or another group, some participants served jointly. In the informational session before the project, all participants were informed about participation expectations, potential risks, time commitments, and other relevant details to ensure a safe and successful project. The project began with eleven individuals who willingly committed during our interest meeting and attended the first session. Participants came from diverse geographical, educational, and socio-economic backgrounds, with ages ranging from their early thirties to sixty-five, making the median age of participants forty-six and a half years. Five participants identified as female, and three identified as male. All but one participant were members before I was appointed Senior Pastor.

The primary goal of this project was to educate leaders about the trauma experienced within the church, the personal traumas from their lives, and how these traumas impact and potentially hinder their leadership. Through discussion, participants were equipped to identify the traumas they had experienced individually and in some cases, collectively, which shape how they were led and how they currently lead. They recognized that many members had been traumatized, and regrettably, those who chose to leave our church—many of whom never returned—needed to be reached out to so they could heal as well. Scripturally, the people Moses led endured immense hardships at the hands of Pharaoh; their deliverance can also be seen as a source of trauma, accompanied by their subsequent period of wandering without entering the promised land. The hope of

this project was to equip our leaders with the necessary tools to become better Christians and leaders.

Conclusion

Reflecting on the research project conducted at Progressive Baptist Church, which focused on training and equipping leaders to identify trauma and understand its impact on leadership, I am confident in its success. However, I recognize areas for improvement in future endeavors. One key takeaway is ensuring that participants feel comfortable sharing their thoughts and feedback throughout each session. While I intentionally created space for discussion, I realized that sometimes, I may not have provided enough time or opportunities for all voices to be heard. However, the feedback shared by participants was invaluable and enriched the conversations, making the project more meaningful and insightful.

My teaching approach was deliberately different from the conventional Bible Study lecture format. I aimed to cultivate a safe and open environment for participants where conversation could flourish. This fostered deeper engagement with the material, and I equipped leaders with the tools and content necessary to address the needs of individuals and the ministries they serve. One of my favorite moments was a ten-minute dialogue across the table that emerged in response to a controversial subject. A participant shared a perspective everyone disagreed with, but their way of informing this participant was grounded in the loving language learned from previous sessions. As the Senior Pastor, I take my role of equipping the congregation for the work of ministry seriously, particularly since during my introspective time, I have noted numerous failures. These

sessions provided an opportunity to fulfill that mission, improve upon previous shortcomings, and ensure the material offered would help leaders avoid making the same mistakes. Since this was the first project in the church's history, it was essential to balance providing crucial information and preventing overwhelming the participants, which could lead to disengagement.

The core of my approach focused on grounding each lesson in scripture, packaging it with psychological language, insights, and medical treatments to provide additional clarity. This balance ensured that participants could see the connection between biblical teachings and practical psychological principles, particularly in the context of trauma-informed leadership. Since Progressive Baptist Church is a Bible-believing congregation, I intentionally used the Word of God as the primary teaching tool, ensuring that the content was biblically sound. The positive feedback from participants, who expressed gratitude for the scriptural perspective, was encouraging.

The preparation for this project was transformative for me, personally. Through research, writing, and conversations with mentors and peers, I gained valuable insights that shaped my understanding of trauma's effects on leadership. Each foundational chapter of the project deepened my comprehension of the biblical, historical, theological, and interdisciplinary aspects of leadership while also challenging me to consider how trauma and its impact on leadership styles need to be addressed in the church. The work of psychologists, especially Sigmund Freud, helped me explore how leadership can transform the lives of the wounded and how leaders can be responsive to the emotional and spiritual needs of others.

This research was essential for our church, especially as we seek to develop a congregation of thoughtful leaders capable of making a lasting impact on the community. Historically, the church adopted a model of leadership characterized by silent suffering, where actions were often dictated by what individuals felt comfortable disclosing, particularly after experiencing losses. However, this project challenged the silent, suppressive approach and introduced a leadership model that is more biblically aligned and psychologically stable. The positive response to this shift from participants was encouraging and indicated a strong desire for cultural change within the church.

Reflecting on the outcomes of this project, I recognize its potential as a model for churches across the country. This model is not denominationally specific or biased against participants' ages or leadership roles. Any church hoping to update its leadership framework can benefit from these lessons, especially after experiencing hurt. I aim to further develop this work into a resource that ministry leaders can use to transform their leadership practices and equip their teams for greater ministry success.

Ultimately, this project reinforced the need for compassionate, transformational Christian leadership. It is not merely about managing tasks or achieving goals; it is about fostering profound, meaningful change in the lives of individuals and communities. This project has been a catalyst for growth, deepening my understanding of leadership, enriching my spiritual life, and sharpening my calling as a servant leader. I am now more confident in my ability to lead in a way that aligns with God's purposes for His church.

I hope this work will serve as an example for other churches to transition from a trauma-allowing to a trauma-addressing leadership model. By following the biblical examples of leaders like Moses and Joshua, churches can better equip their leaders to

serve their congregations and communities in ways that foster long-lasting, communal change. As we continue to address the realities of trauma within our leadership, I believe this project can help guide churches toward a more biblically faithful, trauma-sensitive, and transformational approach to leadership.

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